







Overview: Together on Pathways to Wellness

"We all have one thing in common: we were led into recovery by caring, compassionate, and competent peers who got there first, but not on their own."

Allen McQuarrie
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Community Health Accomplishment Support

join the voices for recovery

OPEN

On pathways to wellness



OVERVIEW: TOGETHER ON PATHWAYS TO WELLNESS

A mental health problem or substance use disorder can affect anyone. These conditions do not discriminate by age, race, ethnicity, gender, or income status and are as prevalent as many other health issues. It is estimated that behavioral health conditions – which include mental and/or substance use disorders – will surpass physical conditions as the major cause of disability in the United States by 2020.¹ However, optimism is widespread: two-thirds of Americans believe that people can manage a mental illness with treatment and support,² and nearly two-thirds say they would not think less of a person with an addiction.³

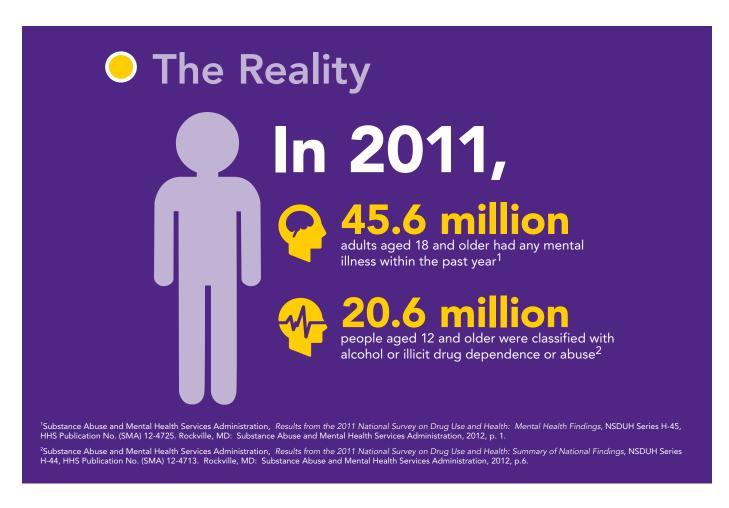
Every September, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **National Recovery Month**) to increase awareness and understanding of mental and/or substance use disorders. This celebration promotes the message that behavioral health is essential to health, prevention works, treatment is effective, and people do recover.

The 2013 **Recovery Month** theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life. The theme highlights that people are not alone on this journey to seek total health every day. Family, friends, and community members can support individuals throughout the entire recovery process. The theme also emphasizes that there are many paths to wellness, including professional treatment, medical care, self-help, and group support, and each person embarks on his or her own unique path.

The annual **Recovery Month** observance aligns with SAMHSA's mission to reduce the impact of substance abuse and mental illness on America's communities. It supports many of SAMHSA's Strategic Initiatives (http://www.samhsa.gov/about/strategy.aspx), including preventing mental and/or substance use disorders, promoting recovery and resilience, and increasing public understanding. Mental and substance use disorders in particular are closely tied to other chronic health issues. Research shows that rates of mental health problems are significantly higher for people with chronic health problems such as diabetes, asthma, and heart conditions than for people without these conditions.⁴ Additionally, excessive alcohol use and substance use are directly linked to increased burden from chronic disease, diabetes, and cardiovascular problems.⁵

This document outlines the prevalence of behavioral health conditions, describes the warning signs of mental and/ or substance use disorders, provides a snapshot of the targeted outreach guides featured in the toolkit to help you reach specific groups with the **Recovery Month** message, and emphasizes that recovery is possible.





The Issue...

The impact of mental and/or substance use disorders can be detrimental to individuals and can often result in strained relationships at home and in the workplace, affecting friends, families, and communities. Research indicates that mental illness may lead to an increased risk of living in poverty, having a lower socioeconomic status, having lower educational levels, and experiencing domestic violence.⁶ Similarly, accidents, crime, domestic violence, illness, lost opportunity, and reduced productivity are directly correlated with substance abuse.⁷

Mental illness is not a sign of weakness – it results from a combination of biological, psychological, and social factors.⁸ Additionally, experts estimate that genetic factors account for between 40 and 60 percent of a person's likelihood of developing an addiction to illegal substances,⁹ and research also provides strong evidence that genes contribute to the development of alcohol dependence.¹⁰



Often, people simultaneously experience both a mental and a substance use disorder, which is referred to as having a co-occurring disorder. More than one in four adults living with serious mental illness have a co-occurring substance use disorder, and people who have substance use disorders are roughly twice as likely to have a mood or anxiety disorder as those who do not. A variety of factors contribute to the correlation between mental health problems and substance use disorders, including:

- Certain illegal drugs can cause people with an addiction to experience one or more symptoms of a mental illness.
- Mental illness can sometimes lead to alcohol or drug abuse, as some people with a mental health problem may misuse these substances as a form of self-medication.
- Mental and substance use disorders share some underlying causes, including changes in brain composition, genetic vulnerabilities, and early exposure to stress or trauma.

Trauma can result from an event, series of events, or set of circumstances that are physically or emotionally harmful or threatening, and can manifest itself in many ways, including the inability to cope with the normal stresses and strains of daily living; to trust and benefit from relationships; and to manage emotions, memory, attention, thinking, and behavior.¹⁴ Not only is trauma strongly associated with mental and substance use disorders, but unaddressed trauma also significantly increases the risk of chronic diseases and criminal behavior.¹⁵

The Signs...

To reduce the impact of behavioral health conditions, it's important to know the signs of mental and/or substance use disorders. The most common signs and symptoms of mental health problems among adults include:16

- Confused thinking;
- Prolonged depression (sadness or irritability);
- Feelings of extreme highs and lows;
- Excessive fears, worries, and anxieties;
- Social withdrawal;
- Dramatic changes in eating or sleeping habits;
- Strong feelings of anger;
- Delusions or hallucinations;
- Growing inability to cope with daily problems and activities;
- Suicidal thoughts;
- Denial of obvious problems;
- Numerous unexplained physical ailments; and
- Substance abuse.



The most frequently displayed signs of a substance use disorder among adults include:17

- Bloodshot eyes and abnormally sized pupils;
- Changes in appetite or sleep patterns;
- Sudden weight loss or weight gain;
- Deterioration of physical appearance;
- Unusual smells on breath, body, or clothing;
- Tremors, slurred speech, or impaired coordination;
- Drop in attendance and performance at work or school;
- Unexplained need for money or financial problems;
- Engaging in secretive or suspicious behaviors;
- Sudden change in friends, favorite hangouts, and hobbies;
- Frequently getting into trouble (fights, accidents, illegal activities);
- Unexplained change in personality or attitude;
- Sudden mood swings, irritability, or angry outbursts;
- Periods of unusual hyperactivity, agitation, or giddiness;
- Lack of motivation; and
- Appearing fearful, anxious, or paranoid, with no reason.

To learn about specific signs of mental and/or substance use disorders among youth and young adults, refer to the "Young Adults" section of this toolkit.

The Pathways to Wellness...

Living with a mental and/or substance use disorder can be challenging, but there is hope, and treatment is effective. In particular, combining treatment and support methods yields favorable outcomes for overcoming both mental health problems and substance use disorders. Between 70 and 90 percent of people with a mental illness experience significant reduction of symptoms and improved quality of life with a combination of medication and psychosocial treatments.¹⁸ For many patients with a substance use disorder, a treatment and recovery plan – which is tailored to address each patient's drug abuse patterns and drug-related medical, psychiatric, and social problems – is most effective. This may include treatment medication, when available, in conjunction with behavioral therapy.¹⁹



Prior to seeking treatment, it is equally important to ensure that beneficiaries are insured or have access to health insurance. Open enrollment for the expansions in coverage under the Affordable Care Act (ACA) begins on October 1, 2013. In order to ensure that all uninsured individuals with behavioral health needs are able to enroll successfully, SAMHSA is engaging in an aggressive communications effort that reaches the more than 11 million currently uninsured individuals with behavioral health needs.²⁰ Data from the Centers for Medicare and Medicaid Services (CMS) show nearly one in four people with a mental or substance use disorder lack health insurance, and 30 percent of those with both mental illness and substance use issues lack health insurance.²¹ **Recovery Month** presents an opportunity to encourage enrollment among uninsured people with behavioral health conditions.

Seeking treatment and recovery support is the first step in a rewarding, inspiring recovery process. SAMHSA defines recovery from mental and/or substance use disorders as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.²² Recovery is a unique journey.

For many people, recovery:23

- Emerges from hope;
- Is person-driven;
- Occurs via many pathways;
- Is holistic;
- Is supported by peers and allies;
- Is supported by relationships and social networks;
- Is culturally based and influenced;
- Is supported by addressing trauma;
- Involves individual, family, and community strengths and responsibilities; and
- Is based on respect.

There are also four major dimensions that support a life of recovery:²⁴

- **Health:** Overcome or manage one's disease(s) or symptoms and make informed, healthy choices that support physical and emotional well-being;
- Home: Have a stable and safe place to live;
- **Purpose:** Participate in meaningful daily activities, such as a job, school, volunteer opportunities, family caretaking, or creative endeavors, and have the independence, income, and resources to participate in society; and
- **Community:** Enjoy relationships and social networks that provide support, friendship, love, and hope.



Seeking wellness is an important component to the recovery process. SAMHSA notes that for people with mental and/ or substance use disorders, wellness is not just the absence of disease, illness, or stress, but the presence of purpose in life, active involvement in satisfying work and play, joyful relationships, a healthy body and living environment, and happiness.²⁵ SAMHSA defines the following aspects of life as the Eight Dimensions of Wellness:²⁶

- **Emotional:** Coping effectively with life and creating satisfying relationships;
- Environmental: Achieving good health by occupying pleasant, stimulating environments that support well-being;
- Financial: Feeling satisfaction with current and future financial situations;
- Intellectual: Recognizing creative abilities and finding ways to expand knowledge and skills;
- Occupational: Obtaining personal satisfaction and enrichment from one's work;
- Physical: Recognizing the need for physical activity, healthy foods, and sleep;
- Social: Developing a sense of connection, belonging, and a well-developed support system; and
- **Spiritual:** Expanding a sense of purpose and meaning in life.

Pathways to wellness are not always clearly defined for every person. While people might face challenges along the way, the recovery journey is worth the effort.

People Affected...

Although anyone can be affected by mental and/or substance use disorders, this year the **Recovery Month** initiative focuses on four groups that play unique roles on the pathways to wellness. Detailed information on the following groups can be found in their respective "Targeted Outreach" sections in this toolkit.

- **Health care providers:** All health care providers including doctors, nurses, physician assistants, pharmacists, emergency care providers, peer support specialists, therapists, and counselors can benefit from increasing their knowledge of mental and/or substance use disorders. This opens the door to prevent, screen, intervene, and provide referrals for prevention, treatment, and recovery support services. Addressing this public health issue requires all health care providers to offer integrated care, helping patients to achieve both mental and physical wellness.
- Young adults: Compared to people of other ages, adolescents and young adults aged 18 to 25 face pressure from friends, parents, school, extracurricular activities, and society, and are more vulnerable to mental and/or substance use disorders. Half of all lifetime cases of mental and substance use disorders begin by age 14 and three-fourths by age 24.²⁷ Emphasizing prevention education, teaching coping skills, and supporting wellness activities will help young people emerge through challenges. In addition, social media offers a key platform to communicate with young adults where they are already holding candid discussions on the topics of mental and/or substance use disorders.



- Families and caregivers of young people: A solid family support environment is a key factor in the prevention of mental and/or substance use disorders, just as strong family support is critical in treatment and recovery. Knowledgeable relatives and caregivers can recognize the signs of a mental and/or substance use disorder and aid someone on his or her path to recovery. Family members living with or caring for someone with a behavioral health issue may also experience their own psychological, emotional, and physical stress. Offering families and caregivers the resources to find proper care will address the specific needs of the family, leading to a more successful treatment and long-term recovery.
- **Community leaders:** The role of a community leader can take on various forms, from a team coach to a faith advisor, elected official, or chair of a neighborhood association. Community leaders are in a unique position to provide encouragement, counsel, and motivation to individuals seeking prevention, treatment, or recovery support services. These leaders have a strong influence and can help open doors to the many pathways to recovery.

Additional Resources...

A variety of resources provide additional information on **Recovery Month** and mental and/or substance use disorders, as well as prevention, treatment, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (http://www.samhsa.gov):** Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **Technical Assistance Centers:** Maximizes self-determination and recovery and assists people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
 - National Consumer Supporter Technical Assistance Center at Mental Health America (http://www.ncstac.org);
 - National Empowerment Center (http://www.power2u.org);
 - National Mental Health Consumers' Self-Help Clearinghouse (http://www.mhselfhelp.org);
 - The Family Café (http://familycafe.net); and
 - The STAR Center (http://www.consumerstar.org/index.html).



- Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS): Provides policy and practice analysis, as well as training and technical assistance, to states, providers, and systems to increase the adoption and implementation of recovery supports for those with behavioral health issues.
- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral healthcare executives, CEOs, and directors, including health care insurance enrollment training information.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment and recovery support needs of the public.
- **Healthcare.gov (http://www.healthcare.gov/index.html):** Contains information on finding health insurance options, help using insurance, information on the Affordable Care Act, help comparing providers, and information on prevention and wellness resources.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



Sources:

- ¹ World Health Organization (WHO). (2004). Promoting Mental Health: Concepts, Emerging Evidence, Practice. Summary Report. Geneva, Switzerland: WHO. Retrieved August 29, 2012, from http://www.who.int/mental_health/evidence/en/promoting_mhh.pdf.
- ² Substance Abuse and Mental Health Services Administration. (2007). What a Difference a Friend Makes. Retrieved August 29, 2012, from https://store.samhsa.gov/shin/content/SMA07-4257/SMA07-4257, pdf. p. 5.
- ³ Substance Abuse and Mental Health Services Administration. (2008). Summary Report CARAVAN Survey for SAMHSA on Addictions and Recovery. Rockville, MD: Office of Communications, SAMHSA. Retrieved August 29, 2012, from http://www.samhsa.gov/attitudes/CARAVAN_LongReport.pdf, p. 1.
- ⁴ Russell, L. (2010). Mental Health Care Services in Primary Care: Tackling the Issues in the Context of Health Care Reform. Center for American Progress. Retrieved August 29, 2012, from http://www.americanprogress.org/wp-content/uploads/issues/2010/10/pdf/mentalhealth.pdf, p. 6.
- ⁵ National Institute on Drug Abuse. (2012). Medical consequences of drug abuse. Committee on the Prevention of Mental Disorders and Substance Abuse among Children, Youth, and Young Adults: Research Advances and Promising Interventions. Retrieved September 18, 2012, from http://drugabuse.gov/consequences.
- ⁶ Russell, L. (2010). Mental Health Care Services in Primary Care: Tackling the Issues in the Context of Health Care Reform. Center for American Progress. Retrieved August 29, 2012, from http://www.americanprogress.org/wp-content/uploads/issues/2010/10/pdf/mentalhealth.pdf, p. 5-6.
- 7 Office of National Drug Control Policy. (1999). Consequences of Illegal Drug Use. Retrieved August 29, 2012, from https://www.ncjrs.gov/ondcppubs/publications/policy/99ndcs/ii-b.html.
- 8 Substance Abuse and Mental Health Services Administration. (n.d.). Mental Illness: Myths and Facts. Retrieved August 29, 2012, from http://www.whatadifference.samhsa.gov/learn.asp?nav=nav01_1&content=1_1_mythsfacts.
- 9 National Institute on Drug Abuse. (2010). Drug Abuse and Addiction. Retrieved August 29, 2012, from http://www.drugabuse.gov/publications/science-addiction/drug-abuse-addiction.
- ¹⁰ Dick, D., and Agrawal, A. (2008). The Genetics of Alcohol and Other Drug Dependence. Alcohol Research and Health. Retrieved September 18, 2012, from http://pubs.niaaa.nih.gov/publications/arh312/111-118.pdf, p. 1.
- ¹¹ Substance Abuse and Mental Health Services Administration. (2012). Mental Health, United States, 2010. HHS Publication No. (SMA) 12-4681. Rockville, MD: Substance Abuse and Mental Health Services Administration, p. 14.
- ¹² National Alliance on Mental Illness. (n.d.). The High Costs of Cutting Mental Health. Retrieved August 29, 2012, from http://www.nami.org/Content/NavigationMenu/State_Advocacy/About_the_Issue/HealthCare.pdf.
- 13 National Institute on Drug Abuse. (2010). Comorbidity: Addiction and Other Mental Illness. Retrieved August 29, 2012, from http://www.drugabuse.gov/sites/default/files/rrcomorbidity.pdf, p. 3.
- 14 Substance Abuse and Mental Health Services Administration. (2012). Part One: Defining Trauma. Retrieved December 12, 2012, from http://www.samhsa.gov/traumajustice/traumadefinition/definition.asox.
- ¹⁵ Substance Abuse and Mental Health Services Administration and National Association of State Mental Health Program Directors. (2004). The damaging consequences of violence and trauma. Retrieved December 12, 2012, from http://www.nasmhpd.org/docs/publications/archiveDocs/2004/Trauma Services doc FINAL-04.pdf, p. vii.
- ¹⁶ Mental Health America. (n.d.). Mental Illness and the Family: Recognizing Warning Signs and How to Cope. Retrieved August 29, 2012, from http://www.nmha.org/go/information/get-info/mi-and-the-family/recognizing-warning-signs-and-how-to-cope.
- ¹⁷ HelpGuide. (2012). Drug Abuse and Addiction: Signs, Symptoms, and Help For Drug Problems And Substance Abuse. Retrieved August 29, 2012, from http://www.helpguide.org/mental/drug_substance_abuse_addiction_signs_effects_treatment.htm.
- 18 National Alliance on Mental Illness. (n.d.). What is Mental Illness: Mental Illness Facts. Retrieved August 29, 2012, from http://www.nami.org/template.cfm?section=about_mental_illness.
- ¹⁹ National Institute on Drug Abuse. (2009). Principles of Drug Addiction Treatment: A Research-Based Guide. Retrieved August 29, 2012, from http://www.drugabuse.gov/sites/default/files/podat 0.pdf, p. 3.
- ²⁰ Substance Abuse and Mental Health Services Administration. (n.d.). Behavioral Health Needs of the Newly Eligible and Enrollment Assistance Best Practice. Retrieved December 14, 2012, from www.nga.org/files/live/sites/NGA/files/ppt/1204POPULATIONMALONE.PPT.
- ²¹ National Alliance on Mental Illness and National Council for Community Behavioral Healthcare. (2008). Coverage for all: Inclusion of mental illness and substance use disorders in state healthcare reform initiatives. Retrieved December 14, 2012, from http://www.nami.org/Template.cfm?Section=Issue_Spotlights&template=/ContentManagement/ContentDisplay.cfm&ContentID=119024, p. 12.
- ²² SAMHSA Blog. (2012). SAMHSA's Working Definition of Recovery Updated. Retrieved August 29, 2012, from http://blog.samhsa.gov/2012/03/23/defintion-of-recovery-updated.
- ²³ SAMHSA Blog. (2012). SAMHSA's Working Definition of Recovery Updated. Retrieved August 29, 2012, from http://blog.samhsa.gov/2012/03/23/defintion-of-recovery-updated.
- ²⁴ SAMHSA Blog. (2012). SAMHSA's Working Definition of Recovery Updated. Retrieved August 29, 2012, from http://blog.samhsa.gov/2012/03/23/defintion-of-recovery-updated/.
- ²⁵ Dunn, H.L. (1961). High-Level Wellness. Beatty Press: Arlington, VA. Retrieved September 7, 2012, from http://www.promoteacceptance.samhsa.gov/10by10/dimensions.aspx#footnote1.
- ²⁶ Substance Abuse and Mental Health Services Administration. (n.d.). Eight Dimensions of Wellness. Retrieved September 7, 2012, from http://www.promoteacceptance.samhsa.gov/10by10/dimensions.aspx#footnote1.
- ²⁷ Kessler, R.C., Berglund, P., Demler, O., Jin, R., Merikangas, K.R., and Walters, E.E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. Archives of General Psychiatry, 62(6), 593-602. Retrieved August 29, 2012, from http://archpsyc.ama-assn.org/cgi/content/full/62/6/593.

Community Leaders

"I am a real partner in the most wonderful, giving relationship I could ever dream of. I work, vote, pay taxes, and I am involved in my community."

Curtiss Kolodney

Recovery Support Services Consultant Washington, DC

Cornrunity Spirituality

Service

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CUPPORT

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OPPORTURE On pathways to wellness



COMMUNITY LEADERS

Community leaders are in a position to promote healthy attitudes and behaviors throughout their communities. These prominent residents may include teachers, counselors, city and county officials, clergy, coaches, and volunteers. They can encourage and motivate individuals to seek prevention, treatment, or recovery support services for mental and/or substance use disorders.

To engage community leaders and other audiences about raising awareness of this important issue, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **National Recovery Month (Recovery Month).**Each September, this observance increases awareness and understanding of mental and substance use disorders. It promotes the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover.

The 2013 **Recovery Month** theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life. In its 24th year, **Recovery Month** educates individuals and communities that there are multiple pathways to achieving physical and mental wellness, and that community leaders can make a big difference in guiding people to those pathways.

In particular, community leaders have the power to change perceptions and spread a message of hope regarding the effectiveness of prevention and treatment. Through community education, encouragement, promotion of the possibilities of recovery, and by their own example, community leaders also can play an important role in a person's decision to seek help for a mental and/or substance use disorder.

From 2008 to 2011, 12.3 percent of people seeking treatment for illicit drug or alcohol abuse were deterred from treatment because they were concerned their community would have a negative opinion of them,¹ and 8 percent of people were deterred from mental health services for the same reason.² These statistics underscore why community leaders' efforts to encourage people to obtain the help they need can be so critical.

This document covers how community leaders can reduce the impact of mental and substance use disorders and be supporters of the recovery journey.

Assess and Evaluate...

To be successful, community leaders should understand the effects of behavioral health conditions on the local population. Decision-makers may conduct a mental disorder community needs assessment (http://www.ncstac.org/content/materials/CommunityNeedsAssessment.pdf), which helps to define the problem and guide the creation of recovery-oriented mental disorder services and systems.³ Recovery-oriented mental disorder systems embrace self-determination, empowering relationships, meaningful roles in society, and eliminating prejudice or discrimination.⁴



A mental disorder community needs assessment is divided into the following sections:⁵

- Community demographics;
- Consumer leadership;
- Service gaps;
- Barriers to receiving recovery-oriented services; and
- Organization of services and funding.

In addition, the following are steps to evaluate how substance use disorders affect individuals in your area:6

- Measure the nature and extent of alcohol and drug abuse patterns and trends, using public access data or state-specific data, or by creating and distributing guestionnaires.⁷
- Collect data on risk and protective factors throughout the community.⁸ Risk factors may include substance
 availability or poverty; protective factors may include anti-drug policies or after-school activities.⁹ Visit SAMHSA's
 Collaborative for the Application of Prevention Technologies website for more information on risk and
 protective factors.
- Understand how the community's culture is affected by alcohol and drug abuse.¹⁰ For example, drug abuse also plays a role in many major social problems, such as violence, stress, child abuse, and drugged driving. For facts on drugged driving, visit http://www.drugabuse.gov/related-topics/drugged-driving. Drug abuse can lead to homelessness, crime, and missed work or problems with keeping a job.¹¹
- Consult with other community leaders working in drug abuse prevention, treatment, law enforcement, mental health, and related areas to learn about the local impact from their perspectives.¹²
- Assess community awareness of the problem by reaching out to school officials and neighborhood associations, or by creating public surveys administered on a locality's website.¹³
- Identify existing prevention efforts already under way to address the problem.¹⁴

An assessment should also include a review of the resources available for obtaining health insurance coverage.¹⁵ The Affordable Care Act (ACA) creates significant new opportunities for affordable coverage of behavioral health services, as well as new processes and community resources for accessing coverage.

By evaluating these needs on a local level, community leaders can create an informed action plan to help individuals with behavioral health issues.¹⁶



Develop a Plan...

Once the current behavioral health environment in a community is understood, community leaders can determine the best way to reach audiences and make a difference. How leaders decide to communicate the prevention, treatment, and recovery message will depend on their role in the community and society. For example, a school principal may decide to offer group counseling activities for students after school or parental education meetings. A neighborhood association chair member may encourage residents to participate in monthly activities that promote physical health and well-being. Faith-based leaders can create welcoming environments for people in recovery from mental and/or substance use disorders.

Action plans usually start by identifying the goals for any wellness activities that are planned. A goal may include building a safe community environment to promote wellness locally. According to the National Prevention Strategy, safe community environments include those with clean air and water, affordable and secure housing, efficient transportation, good schools, violence-free places to be active, access to affordable healthy foods, and streetscapes designed to prevent injury.¹⁷ Maintaining these core community principles will help reduce risk factors for behavioral health conditions.

As another resource, SAMHSA's Communities That Care program helps community decision-makers select and implement tested, effective prevention policies and programs to address the most pressing risks facing their youth.

Take Action in the Community...

Community involvement opportunities, such as after-school activities, counseling, exercise, or participation with religious groups, can provide a sense of belonging for someone suffering from a mental and/or substance use disorder. These activities are perceived and proven to be effective.

For example, most adults with mental illness symptoms (78 percent) and without mental illness symptoms (89 percent) agreed that treatment can help persons with mental illness lead normal lives.¹⁸ In addition, in 2011, approximately 1 in 8 youths aged 12 to 17 reported that they had participated in drug, tobacco, or alcohol prevention programs outside of school in the past year,¹⁹ and the prevalence of past-month use of illicit drugs or marijuana was lower among those who reported having exposure to drug or alcohol prevention messages.²⁰ Communicating openly in the community about behavioral health issues can increase awareness and encourage prevention and treatment services.

During **Recovery Month,** community leaders can engage friends, families, neighbors, colleagues, and peers to rally around the cause. Following are a few ways for community leaders to get involved:

- Start a coalition or partnership to discuss issues, such as mental and substance use disorders that affect the community. Enlist members to develop a public education initiative that promotes positive behavioral health in your area. Refer to the "Build Community Coalitions" document in this toolkit for more information on creating or joining a coalition.
- Learn to recognize the signs and symptoms of mental and substance use disorders to identify individuals who may need help. Refer to the "Overview" section of this toolkit for more information.
- Learn about the available treatment facilities and support services to know where to refer someone in need. For confidential referrals, you can encourage individuals to call SAMHSA's National Helpline (http://www.samhsa.gov/treatment/index.aspx) **1-800-662-HELP (4357)** or visit the treatment locator (http://www.samhsa.gov/treatment).



- Learn about health insurance outreach and education efforts planned in the community as a part of the
 implementation of the Affordable Care Act. Open enrollment starts October 1, 2013, and **Recovery Month**events can build upon and coordinate with these national health information events. For information on
 implementation in a certain state and resources for outreach and education, visit http://www.healthcare.gov/
 law/resources/index.html.
- Organize a rally or event related to **Recovery Month** to unite community members and spread the word that
 recovery from mental and substance use disorders is possible. Refer to the "Promote **Recovery Month** with
 Events" document in this toolkit for more information.
- Connect with people in your area who are in recovery, and encourage them to share their recovery stories with other members of the community. Please refer to the "Join the Voices for Recovery" section of this toolkit for real-life stories of recovery from mental and/or substance use disorders.

Take Action with Youth...

When it comes to educating the community about positive behavioral health practices, schools are critical settings because young people are particularly at risk. Several federal, national, and local initiatives can assist community leaders in promoting behavioral health in schools. For example, SAMHSA's Safe Schools/Healthy Students (http://www.sshs.samhsa.gov/default.aspx) initiative creates healthy learning environments that help students succeed in school and build healthy relationships. The program promotes safety, mental disorder services, and emotional support for students. It also provides alcohol and drug prevention activities to schools across the United States. Community leaders who are interested in learning more about the initiative and available federal funding can take the Grant Readiness Assessment Quiz (http://www.sshs.samhsa.gov/apply/assess.aspx).²¹

To promote total wellness, community leaders can also encourage physical activity and support healthy lifestyles for young people.²² Programs for youth, such as Students Against Destructive Decisions, Big Brothers Big Sisters, and the Let's Move campaign, promote positive peer support, provide role models and mentors, and help improve the overall health of the next generation.

Faith-based leaders and congregations are also vital to promoting total wellness for youth in their communities because they are trusted resources.²³ Working in conjunction with other community leaders, they can encourage physical wellness by teaching kids to live healthy lives, including emphasizing the need to have a healthy diet.²⁴ Among the many reasons that healthy eating is important, a study of nearly 17,000 boys and girls found a correlation between routine overeating and the onset of marijuana and other drug use.²⁵

Elected officials can take advantage of SAMHSA's Children's Mental Health Initiative, which funds government entities to create a network of effective community-based services and supports to improve the lives of children and youth – and their families – with serious mental illnesses.²⁶

Lastly, collaborative community efforts can provide support for behavioral health issues, helping youth succeed and achieve a well-rounded future. Community activities, such as National Prescription Drug Take-Back Day, can provide a concrete way for people to help by safely disposing of unwanted or unused medications.



Continue on a Path to Wellness...

Community leaders can encourage people to build a sound body and mind, which can help prevent the onset of behavioral health conditions and improve a person's chances of recovering. To focus these efforts, it can be helpful to address the eight dimensions of wellness, which SAMHSA outlines in its Wellness Initiative. These include:²⁷

- Emotional: Coping effectively with life and creating satisfying relationships;
- **Environmental:** Achieving good health by occupying pleasant, stimulating environments that support well-being;
- Financial: Feeling satisfaction with current and future financial situations;
- Intellectual: Recognizing creative abilities and finding ways to expand knowledge and skills;
- Occupational: Obtaining personal satisfaction and enrichment from one's work;
- Physical: Recognizing the need for physical activity, healthy foods, and sleep;
- Social: Developing a sense of connection, belonging, and a well-developed support system; and
- **Spiritual:** Expanding a sense of purpose and meaning in life.

Community leaders can emphasize these wellness principles through their unique social network and individual responsibilities. For instance, guidance counselors may provide career advice, a coach may help his or her athletes attain their overall health and fitness goals, and a clergy member can reach a person spiritually.

No matter the approach or scope of these efforts, every contribution from community leaders is valuable. Housing, employment, education, and socialization are all pieces of the puzzle that fit together to achieve overall behavioral health objectives²⁸ and lead people to successful, satisfying, and healthy lives integrated in the community.²⁹ There are many pathways for community leaders to make a difference during **Recovery Month** and throughout the year.

Make a Difference During Recovery Month and Throughout the Year...

There are many ways to involve the community and spread the message of **Recovery Month.** Consider taking the following steps:

- **Encourage people to speak up.** Motivate community members to share how mental and/or substance use disorders have affected their lives. These stories may inspire others to pursue recovery.
- **Spread the word about resources.** Remind community members that they can make healthy lifestyle changes by taking advantage of local prevention, treatment, and recovery support services.
- Join in the local celebrations. Attend local recovery events to celebrate others' accomplishments.



Additional Resources...

A variety of resources provide additional information on **Recovery Month** and/or mental and substance use disorders, as well as prevention, treatment, insurance enrollment information, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (http://www.samhsa.gov):** Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.
- SAMHSA's Safe Schools/Healthy Students (http://www.sshs.samhsa.gov/default.aspx): Prevents violence and substance abuse among our nation's youth, schools, and communities.
- SAMHSA's Recovery Community Services Program (http://www.samhsa.gov/grants/2011/ti_11_004. aspx): Supports peer leaders from the recovery community in providing recovery support services to people in recovery and their family members, and fosters the growth of communities of recovery that will help individuals and families achieve and sustain long-term recovery.
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- Technical Assistance Centers: Maximizes self-determination and recovery and assists people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
 - National Consumer Supporter Technical Assistance Center at Mental Health America (http://www.ncstac.org);
 - National Empowerment Center (http://www.power2u.org);
 - National Mental Health Consumers' Self-Help Clearinghouse (http://www.mhselfhelp.org);
 - The Family Café (http://familycafe.net); and
 - The STAR Center (http://www.consumerstar.org/index.html).
- Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS) (http://tie.sam hsa.gov/Documents/pdf/factsheet_plain.pdf): Provides policy and practice analysis, as well as training and technical assistance, to states, providers, and systems to increase the adoption and implementation of recovery supports for those with behavioral health issues.



- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral healthcare executives, CEOs, and directors, including health care insurance enrollment training information.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment, and recovery support needs of the public.
- Communities That Care (http://www.sdrg.org/ctcresource/index.htm): Helps decision-makers in the community select and implement tested, effective prevention policies and programs to address the most pressing risks facing their youth.
- Easy to Read Drug Facts (http://www.easyread.drugabuse.gov/index.php): Talks about drug abuse, addiction, and treatment. The website has pictures and videos to help readers understand the text.
- **Healthcare.gov (http://www.healthcare.gov/index.html):** Contains information on finding health insurance options, help using insurance, information on the Affordable Care Act, help comparing providers, and information on prevention and wellness resources.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



Sources:

- ¹ Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 86.
- ² Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 26.
- ³ National Mental Health Association, National Consumer Supporter Technical Assistance Center. (n.d.). Community Needs Assessment. Retrieved September 18, 2012, from http://www.ncstac.org/content/materials/CommunityNeedsAssessment.pdf.
- ⁴ National Mental Health Association, National Consumer Supporter Technical Assistance Center. (n.d.). Community Needs Assessment. Retrieved September 18, 2012, from http://www.ncstac.org/content/materials/CommunityNeedsAssessment.pdf.
- ⁵ National Mental Health Association, National Consumer Supporter Technical Assistance Center. (n.d.). Community Needs Assessment. Retrieved September 18, 2012, from http://www.ncstac.org/content/materials/CommunityNeedsAssessment.pdf.
- 6 U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Preventing Drug Use among Children and Adolescents. A Research-Based Guide for Parents, Educators, and Community Leaders. Retrieved September 18, 2012, from http://www.drugabuse.gov/sites/default/files/preventingdruguse.pdf, p.14.
- ⁷ U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Preventing Drug Use among Children and Adolescents. A Research-Based Guide for Parents, Educators, and Community Leaders. Retrieved September 18, 2012, from http://www.drugabuse.gov/sites/default/files/preventingdruguse.pdf, p.14.
- ⁸ U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Preventing Drug Use among Children and Adolescents. A Research-Based Guide for Parents, Educators, and Community Leaders. Retrieved September 18, 2012, from http://www.drugabuse.gov/sites/default/files/preventingdruguse.pdf, p.14.
- 9 U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Preventing Drug Abuse among Children and Adolescents What are Risk Factors and Protective Factors. Retrieved September 26, 2012, from http://www.drugabuse.gov/publications/preventing-drug-abuse-among-children-adolescents/chapter-1-risk-factors-protective-factors/what-are-risk-factors.
- 10 U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Preventing Drug Use among Children and Adolescents. A Research-Based Guide for Parents, Educators, and Community Leaders. Retrieved September 18, 2012, from http://www.drugabuse.gov/sites/default/files/preventingdruguse.pdf, p.14.
- U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Drug Abuse. Retrieved September 26, 2012, from http://www.nlm.nih.gov/medlineplus/drugabuse.html.
- 12 U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Preventing Drug Use among Children and Adolescents. A Research-Based Guide for Parents, Educators, and Community Leaders. Retrieved September 18, 2012, from http://www.drugabuse.gov/sites/default/files/preventingdruguse.pdf, p.14.
- 13 U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Preventing Drug Use among Children and Adolescents. A Research-Based Guide for Parents, Educators, and Community Leaders. Retrieved September 18, 2012, from http://www.drugabuse.gov/sites/default/files/preventingdruguse.pdf, p.14.
- 14 U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Preventing Drug Use among Children and Adolescents. A Research-Based Guide for Parents, Educators, and Community Leaders. Retrieved September 18, 2012, from http://www.drugabuse.gov/sites/default/files/preventingdruguse.pdf, p.14.
- ¹⁵ Health Outreach Partners. (n.d.). National Outreach Guidelines for Underserved Populations. Retrieved December 6, 2012, from http://www.outreach-partners.org/resources/nationaloutreachguidelines.
- 16 U.S. Department of Health and Human Services. (2012). Patient Protection and Affordable Care Act; Establishment of Exchanges and Qualified Health Plans; Exchange Standards for Employers. Federal Register, 77(59), 18310. Retrieved April 22, 2013, from http://www.gpo.gov/fdsys/pkg/FR-2012-03-27/pdf/2012-6125.pdf.
- 17 U.S. Department of Health and Human Services, National Prevention Council. (2011). National Prevention Strategy. America's Plan for Better Health and Wellness. Retrieved September 18, 2012, from http://www.healthcare.gov/prevention/nphpphc/strategy/report.pdf, p. 14.
- ¹⁸ U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. (2010). Morbidity and Mortality Weekly Report (MMWR): Attitudes Toward Mental Illness 35 States, District of Columbia, and Puerto Rico, 2007. Retrieved October 17, 2012, from http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5920a3.htm.
- ¹⁹ Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 70.
- ²⁰ Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 71.
- ²¹ About the Safe Schools/Healthy Students (SS/HS) initiative. (n.d.). Retrieved September 18, 2012, from http://www.sshs.samhsa.gov/initiative/about.aspx.
- ²² U.S. Department of Health and Human Services, Centers for Faith-Based and Neighborhood Partnerships. (n.d.). Let's Move Faith and Communities. Toolkit for Faith-Based & Neighborhood Organizations. Retrieved September 18, 2012, from http://www.hhs.gov/partnerships/resources/Pubs/lets_move_toolkit.pdf, p. 23.
- ²² U.S. Department of Health and Human Services. (n.d.). Community Leaders Take Action. Retrieved September 18, 2012, from http://www.letsmove.gov/community-leaders.
- ²⁴ U.S. Department of Health and Human Services, Centers for Faith-Based and Neighborhood Partnerships. (n.d.). Let's Move Faith and Communities. Toolkit for Faith-Based & Neighborhood Organizations. Retrieved September 18, 2012, from http://www.hhs.gov/partnerships/resources/Pubs/lets_move_toolkit.pdf, p.12.



25 Boston Children's Hospital. (2012). Young Binge Eaters Prone to Illicit Drug Use: Study. Retrieved December 12, 2012, from http://healthlibrary.childrenshospital.org/NewsRecent/6,671493.

²⁶ U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2012). Promoting Recovery and Resilience for Children and Youth Involved in Juvenile Justice and Child Welfare Systems (SMA-12-4697). Retrieved September 24, 2012, from http://www.samhsa.gov/children/SAMHSA_ShortReport_2012.pdf.

²⁷ Swarbrick, M. (2006). A Wellness Approach. *Psychiatric Rehabilitation Journal*, 29(4), pp. 311–314.

²⁸ Substance Abuse and Mental Health Services Administration. (n.d.). *Building Communities of Recovery: How Community-Based Partnerships and Recovery Support Organizations Make Recovery Work.* Retrieved September 18, 2012, from http://www.recoverymonth.gov/Resources-Catalog/2012/Webcast/09-How-CommunityBased-Partnerships-and-Recovery-Support-Organizations-Make-Recovery-Work aspx.

²⁹ Substance Abuse and Mental Health Services Administration. (n.d.). *Building Communities of Recovery: How Community-Based Partnerships and Recovery Support Organizations Make Recovery Work*. Retrieved September 18, 2012, from http://www.recoverymonth.gov/Resources-Catalog/2012/Webcast/09-How-CommunityBased-Partnerships-and-Recovery-Support-Organizations-Make-Recovery-Work.aspx.

Young Adults

"I'm now 27 years old and have been in recovery for more than 5 years. In that time, I've earned my master's degree and started working toward my doctorate."

Emily Eisenhart

Director, Center for Addiction Recovery, Jiann-Ping Hsu College of Public Health, Georgia Southern University Statesboro, GA Peer Support

Family

Courage

Overcome

Hope

join the voices for recovery

together

on pathways to wellness



YOUNG ADULTS

Young adults are often considered to be at the prime of their lives, taking on new experiences at school, work, or other activities. However, this is also a time when mental and/or substance use disorders can arise. Although a young person may lose sight of healthy habits, it is possible to avoid these problems and receive help that can truly change the direction of a person's life.

With that in mind, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **National Recovery Month** (Recovery Month) each September. This observance, in its 24th year, increases awareness and understanding of the mental and substance use disorders that can affect anyone at any age. It also promotes the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover. Young adults, or those who work to support them, can make a big difference in promoting prevention and in ensuring intervention, treatment, and recovery if warranted.

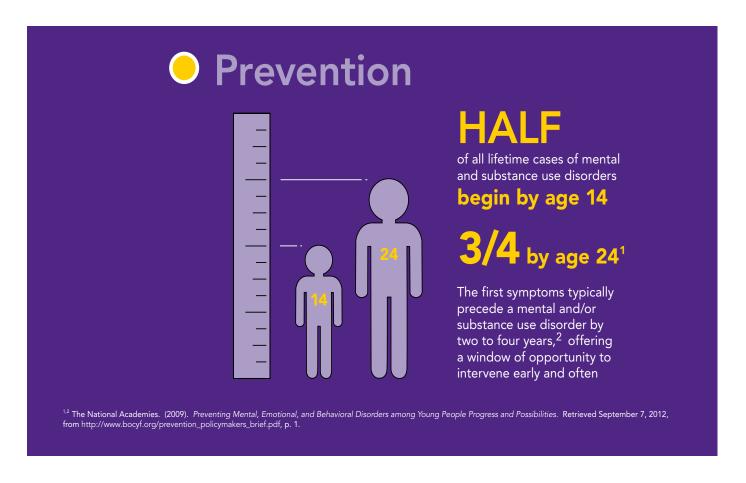
The 2013 **Recovery Month** theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life. Because young adults are disproportionately affected by behavioral health issues, it is important to understand these issues and how to get help.

In 2011, the percentage of young adults 18 to 25 (29.8 percent) who had a mental illness was the highest among adults.¹ In addition, the rate of substance dependence or abuse among adults aged 18 to 25 (18.6 percent) was higher than that among youths aged 12 to 17 (6.9 percent) and among adults aged 26 or older (6.3 percent).²

Young adults are also more likely to be uninsured and therefore lack access to affordable treatment even if they look for it.³ As a result of the Affordable Care Act (ACA), many of these young adults will be eligible for affordable health insurance coverage that includes substance abuse and mental health services.⁴ It is critical that these young adults know about the opportunity for coverage starting with open enrollment on October 1, 2013.

This document features ways to identify risk factors and the signs and symptoms of behavioral health conditions for young adults and details how to seek help or support others.





Understand Who's at Risk...

Young adults cannot afford to ignore the risk factors of behavioral health conditions. Ultimately, anyone can be at risk, regardless of age, race, ethnicity, sex, religious beliefs, or sexual orientation. It is important to understand the potential factors that may contribute to behavioral health conditions. Mental illnesses may develop in people who have experienced the following situations:⁵

- Stressful life experiences, such as financial problems, death of a loved one, divorce;
- Abuse or neglect;
- Personal substance abuse;
- A chronic health condition, such as cancer;
- A traumatic event, such as a military deployment; and
- Having few meaningful relationships or friends.



In addition, individuals who have been exposed to certain factors may be more at risk of developing a substance use disorder. These factors include:

- Lack of parental supervision;⁶
- Family history of addiction;⁷
- History of mental illness;
- Peer pressure;8
- Anxiety, depression, or loneliness;9 and
- Stressful life experiences, such as poverty or trauma. 10, 11

Recognize the Signs...

If someone is at risk, he or she can display early signs of behavioral health issues two to four years before the problem can be fully diagnosed.¹² It's important to take these signs seriously and not dismiss them as a normal part of growing up because early intervention is important.

Signs that someone may be experiencing a mental illness include:13

- Confusion;
- Prolonged depression (sadness or irritability);
- Feelings of extreme highs and lows;
- Excessive fears, worries, and anxieties;
- Social withdrawal;
- Dramatic changes in eating or sleeping habits;
- Strong feelings of anger;
- Delusions or hallucinations;
- Growing inability to cope with daily problems and activities;
- Suicidal thoughts;
- Denial of obvious problems;
- Numerous unexplained physical ailments; and
- Substance abuse.



Signs that someone may be experiencing a problem with substance use include:14

- Bloodshot eyes and abnormally sized pupils;
- Changes in appetite or sleep patterns;
- Sudden weight loss or weight gain;
- Deterioration of physical appearance;
- Unusual smells on breath, body, or clothing;
- Tremors, slurred speech, or impaired coordination;
- Drop in attendance and performance at work or school;
- Unexplained need for money or other financial problems;
- Secretive or suspicious behaviors;
- Sudden change in friends, favorite hangouts, and hobbies;
- Frequent trouble, such as fights, accidents, illegal activities;
- Unexplained change in personality or attitude;
- Sudden mood swings, irritability, or angry outbursts;
- Periods of unusual hyperactivity, agitation, or giddiness;
- Lack of motivation; and
- Appearing fearful, anxious, or paranoid, with no apparent reason.

It is important to note that these signs may also be related to other physical illnesses and may be unrelated to a behavioral health condition. In any case, these signs should be addressed to determine the cause, allowing for young adults to get the proper support and treatment for their needs.

Lend a Hand...

Just like diabetes, cancer, or obesity, mental and substance use disorders can be treated. However, many young adults find it hard to accept that there is an issue or that they should seek help. It's easy to feel like you can get over a mental and/or substance use disorder quickly by "snapping out of it," or even feel ashamed about the problem. However, believing you are invincible could keep you from receiving potentially life-saving prevention, treatment, and recovery support resources. 16



Support from social networks can make a difference. Consider taking the following steps to help a friend, colleague, or other peer who may have a mental and/or substance use disorder:¹⁷

- Express interest and concern;
- Ask questions, listen to ideas, and be responsive;
- Ask what you can do to help;
- Educate others so they understand the facts about behavioral health; and
- Treat the person with respect, compassion, and empathy.

Upon receiving support, young adults may elect to find private treatment options or engage with members of a group to find and share their personal pathway to wellness. There are many ways for young adults to get help and support for a mental and/or substance use disorder, including joining a support group, attending a recovery high school or collegiate recovery program, or seeking inpatient, residential, or outpatient care. It is important to know that treatment and recovery options should be tailored to the individual's characteristics and needs. For a comprehensive list of treatment options, refer to the "Treatment and Recovery" section of this toolkit.

When facing a situation that appears to be more severe or life-threatening, the **National Suicide Prevention Lifeline** – 1-800-273-8255 (TALK) – or SAMHSA's National Helpline – 1-800-662-HELP (4357) – are available to help.

Take a Stand on Campus...

In 2011, young adults aged 18 to 22 who were enrolled full time in college were more likely than those who were not enrolled full time to use alcohol or binge drink.¹⁸ In addition, 22 percent of college students used illicit drugs in 2011.¹⁹ Help discourage students and peers on your campus from getting involved in risky drinking and other harmful situations.

Most campuses offer a number of helpful resources, and students can encourage university officials to invest in additional recovery activities and workshops. Among popular programs implemented across the nation are Collegiate Recovery Communities (CRCs), which are being adopted by many colleges, according to the Association of Recovery Schools (http://www.recoveryschools.org/schools_college.html). These programs provide a nurturing, affirming environment on campus, helping people achieve their academic, personal, and professional goals. Enrolled students at the college or university can apply to CRCs and have the opportunity to receive treatment and counseling support.²⁰

For many, college can be a stressful time, and it often takes a toll on students' mental well-being. According to a 2011 study, 30 percent of college students reported they felt extremely depressed at least once within the last year.²¹ Consider the following steps to help a student or peer experiencing a mental illness:²²

- Consult a resident assistant or advisor who can direct you to the most appropriate options for prevention, treatment, or recovery support services;
- Approach the student with concern, not judgment, and gently suggest that he or she receive help; and
- Find out about specific meetings or support groups on campus and encourage the person to attend.



Continue on Pathways to Wellness...

Part of wellness is being healthy in body, mind, and spirit. As you start school or a new job, it is important that you are fully fit to succeed. Young adults can pursue wellness and lead a healthy lifestyle by staying active and making safe decisions. Programs like Racing for Recovery (http://www.racingforrecovery.com) can be helpful in creating a fitness and recovery journey.

The "Join the Voices for Recovery" section of this toolkit also features the stories of young adults who have managed their mental and/or substance use disorders. These stories can be examples for young adults who are seeking prevention, treatment, and recovery support services.

Make a Difference During *Recovery Month* and Throughout the Year...

There are many ways to help young adults, or those who work to support them, during **Recovery Month.**Consider taking the following steps:

- **Share your story.** Whether you are in recovery yourself or supporting someone you know who is in recovery, your story will inspire others to pursue recovery.
- Offer encouragement to others. Remind young adults that through prevention and treatment support services, they can be successful on their path to recovery.
- **Celebrate recovery.** If a young adult is in recovery, recognize the accomplishment and let him or her know that you are proud.

Additional Resources...

A variety of resources provide additional information on **Recovery Month** and mental and/or substance use disorders, as well as prevention, treatment, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (http://www.samhsa.gov):** Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.



- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- Association of Recovery Schools (http://www.recoveryschools.org/index.html): Advocates for the promotion, strengthening, and expansion of secondary and post-secondary programs designed for students and families committed to achieving success in both education and recovery.
- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral healthcare executives, CEOs, and directors, including health care insurance enrollment training information.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment and recovery support needs of the public.
- College Drinking: Changing the Culture (http://www.collegedrinkingprevention.gov/Default.aspx):

 Provides comprehensive research-based information on issues related to alcohol abuse and binge drinking among college students, including online tools for parents, students, and administrators.
- **Healthcare.gov (http://www.healthcare.gov/index.html):** Contains information on finding health insurance options, help using insurance, information on the Affordable Care Act, help comparing providers, and information on prevention and wellness resources.
- Helping Young People Experience Recovery (HYPER) (http://www.forrecovery.org): Promotes the positive
 impact of addiction recovery in the community and the lives of individuals and families affected by the disease
 of addiction.
- **Heroes in Recovery (http://www.heroesinrecovery.com):** Celebrates the heroic efforts of those who seek help for mental illness and addiction, without feeling ashamed or isolated.
- National Council on Patient Information and Education (NCPIE) College Resource Kit
 (http://www.talkaboutrx.org/college_resource_kit.jsp): Informs and mobilizes college campuses
 to raise awareness about and address the misuse and abuse of prescription medicines.
- Recovery Opens Doors (http://www.recoveryopensdoors.org/index.html): Helps people talk to friends, other students, individuals, and groups in the community about prevention, treatment, and referral for mental and/or substance use disorders.
- **SMART Recovery®** (http://www.smartrecovery.org): Offers free, self-empowering, science-based mutual help groups for all types of addictive behaviors.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.



- **Teen Challenge International (http://teenchallengeusa.com):** Provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems.
- Youth Move National (http://www.youthmovenational.org): Unites the voices of individuals who have experienced various community systems, including mental health, juvenile justice, education, and child welfare.
- Young People in Recovery (http://youngpeopleinrecovery.org): Engages individuals and entities at all levels to empower young people to find and sustain recovery.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



Sources:

- ¹ Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 10.
- ² Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012. p.77.
- ³ Demos and Young Invincibles. (2011). The State of Young America: The Databook. Retrieved January 10, 2012, from http://www.demos.org/publication/state-young-america-databook
- ⁴ U.S. Department of Health and Human Services. (2012). Patient Protection and Affordable Care Act; Establishment of Exchanges and Qualified Health Plans; Exchange Standards for Employers. Federal Register, 77(59), 45 CFR Parts 155, 156, and 157. Retrieved December 12, 2012, from http://www.gpo.gov/fdys/pkg/FR-2012-03-27/pdf/2012-6125.pdf.
- ⁵ Mayo Clinic. (2011). Mental illness: Risk factors. Retrieved September 12, 2012, from http://www.mayoclinic.com/health/mental-illness/DS01104/DSECTION=risk-factors.
- ⁶ U.S. Department of Health and Human Services, National Institute on Drug Abuse. (2003). Preventing Drug Abuse among Children and Adolescents. Retrieved September 25, 2012, from http://www.drugabuse.gov/publications/preventing-drug-abuse-among-children-adolescents/chapter-1-risk-factors-protective-factors/what-are-risk-factors.
- Mayo Clinic. (2011). Drug addiction: Risk factors. Retrieved September 25, 2012, from http://www.mayoclinic.com/health/drug-addiction/DS00183/DSECTION=risk-factors.
- 8 Mayo Clinic. (2011). Drug addiction: Risk factors. Retrieved September 25, 2012, from http://www.mayoclinic.com/health/drug-addiction/DS00183/DSECTION=risk-factors.
- 9 Mayo Clinic. (2011). Drug addiction: Risk factors. Retrieved September 25, 2012, from http://www.mayoclinic.com/health/drug-addiction/DS00183/DSECTION=risk-factors.
- ¹⁰ U.S. Department of Health and Human Services, National Institute on Drug Abuse. (2003). Preventing Drug Abuse among Children and Adolescents. Retrieved September 25, 2012, from http://www.drugabuse.gov/publications/preventing-drug-abuse-among-children-adolescents/chapter-1-risk-factors-protective-factors/what-are-risk-factors.
- 11 Mayo Clinic. (2011). Drug addiction: Risk factors. Retrieved September 25, 2012, from http://www.mayoclinic.com/health/drug-addiction/DS00183/DSECTION=risk-factors.
- ¹²The National Academies. (2009). Preventing Mental, Emotional, and Behavioral Disorders among Young People: Progress and Possibilities. Retrieved September 25, 2012, from http://www.bocyf.org/prevention_policymakers_brief.pdf.
- ¹³ Mental Health America. (n.d.). Mental Illness and the Family: Recognizing Warning Signs and How to Cope. Retrieved August 29, 2012, from http://www.nmha.org/go/information/get-info/mi-and-the-family/recognizing-warning-signs-and-how-to-cope.
- 14 HelpGuide. (2012). Drug Abuse and Addiction: Signs, Symptoms, and Help For Drug Problems And Substance Abuse. Retrieved August 29, 2012, from http://www.helpguide.org/mental/drug_substance_abuse_addiction_signs_effects_treatment.htm.
- 15 American Psychological Association. (2009). Change Your Mind about Mental Health. Retrieved September 25, 2012, from http://www.apa.org/helpcenter/change.aspx.
- ¹⁶ Holahan, J., & Kenney, G. (2008). Health Insurance Coverage of Young Adults: Issues and Broader Considerations. Retrieved September 25, 2012, from http://www.urban.org/UploadedPDF/411691_young.
- ¹⁷ U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (n.d.). What a Difference a Friend Makes. Retrieved Septmber 25, 2012, from http://www.whatadifference.samhsa.gov/docs/NASC.pdf, p.7.
- ¹⁸ Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 35.
- ¹⁹ Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 23.
- 20 Kennesaw State University. (n.d.). Collegiate Recovery Community (crc). Retrieved September 25, 2012, from http://www.kennesaw.edu/studentsuccessservices/crc/crc.html.
- ²¹ National Action Alliance on Mental Illness, NAMI on Campus. (2007). Mental Illness on Campus What You Can Do to Help. Retrieved September 25, 2012, from http://www.nami.org/Content/NavigationMenu/Find_Support/NAMI_on_Campus1/Mental_Illness_Fact_Sheets/MentalIllnessonCampus.pdf.
- ²² National Action Alliance on Mental Illness, NAMI on Campus. (2007). Mental Illness on Campus What You Can Do to Help. Retrieved September 25, 2012, from http://www.nami.org/Content/NavigationMenu/Find_Support/NAMI_on_Campus1/Mental_Illness_Fact_Sheets/MentalIllnessonCampus.pdf.

Health Care Providers

"My life is a practice of gratitude. I am involved in a system that produces qualified committed counselors who demonstrate personal and professional integrity. I thank God for my recovery."

Dr. Alumstaphael Al-Kahlil-Bey, LPC, MSW, MAC, ICADC
Director, Gospel Rescue Ministries
Recovery Services Program
Washington, DC

Health

Hope

Service

Treatment

Prevention

join the voices for recovery

on pathways to wellness



HEALTH CARE PROVIDERS

Every September, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **National Recovery Month**). Now in its 24th year, this observance increases awareness and understanding of mental and substance use disorders. It promotes the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover.

The 2013 **Recovery Month** theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life. While family, friends, and community members can support individuals throughout their unique recovery journeys, health care providers are vital to these processes. They facilitate pathways to wellness by offering professional treatment, medical care, and group support.

Collaborating with health care providers is a key focus of SAMHSA's Health Reform Strategic Initiative (http://www.samhsa.gov/healthreform). This initiative seeks to increase access to high-quality prevention, treatment, and recovery services. It works to promote integration and coordination of care, especially for people with behavioral health and co-occurring conditions.\(^1\) Health care providers are also critical to executing SAMHSA's Wellness Initiative, which promotes wellness for people with mental and/or substance use disorders. This program motivates individuals, organizations, and communities to work toward improved quality of life and better mental and physical health.

This guide explains the vital roles that health care providers can play in supporting treatment and recovery from mental and substance use disorders.

Understand the Issue...

Behavioral health conditions are a leading public health concern in the United States. Mental disorders are as disabling as cancer or heart disease in terms of lost productivity and premature death, and people with a serious mental illness have a life expectancy that is 25 years shorter than people without a serious mental illness.² Additionally, more than 23 million people in the United States are addicted to alcohol, prescription drugs, or illegal substances.³ These conditions are prevalent throughout every community, and for many, health care providers are a first line of support.

Prevention, treatment, and recovery services are not just the responsibility of behavioral health specialists. All health care professionals, including primary care doctors, nurses, physician assistants, emergency care providers, pharmacists, peer support specialists, therapists, and counselors play an important role in helping those with a mental and/or substance use disorder. Integrated, collaborative, and complementary care provides an individual with a mental and/or substance use disorder the best opportunity for support, treatment, and recovery.



Offering integrated care is critical to minimizing the effects of behavioral health conditions. This requires health care professionals to consider all of a person's health conditions at the same time. That way, it is easier to understand more about the whole person when making treatment decisions. Integrated health care consists of:⁴

- Medical and behavioral health services located either in the same facility or in separate locations, as long as they communicate and coordinate adequately;
- One treatment plan with both behavioral and medical elements;
- Typically, a team working together to deliver care, using a prearranged protocol;
- Teams composed of a physician and one or more of the following: physician's assistant, nurse practitioner, nurse, case manager, family advocate, or behavioral health therapist; and
- Use of a database to track the care of patients who are screened into behavioral health services.

Additionally, implementing an integrated care approach more effectively meets the needs of patients with a co-occurring mental and substance use disorder or a co-occurring physical and behavioral health condition. To fully recover from a co-occurring disorder, research indicates that a patient must receive treatment for both conditions – treating only one will not ensure the other will improve. For patients with co-occurring mental and substance use disorders, integrated treatment entails receiving appropriate treatment for both their mental and substance use disorders in a coordinated fashion, resulting in more effective treatment.

SAMHSA supports a "whole person" philosophy – which means caring for an individual's health condition and delivering services in a recovery-oriented system by providing connections to long-term community care services and supports, social services, and family services. By providing complementary care, behavioral health specialists and primary care professionals address the physical health issues that often correspond with behavioral health conditions. In addition to continually screening for behavioral health conditions and possible signs of relapse, practitioners should talk with patients about ways to improve their overall health, including making a commitment to a nutritional diet, daily exercise, social connections, and avoidance of nicotine, alcohol, and other substances.⁸

Recognize the Challenges...

To improve treatment and services provided to individuals with mental and/or substance use disorders, health care professionals can work to address the challenges often faced when providing behavioral health services, including:

• Lack of training: Many health care providers may not specialize in assessing mental and/or substance use disorders, or may not be trained on where to refer patients for treatment and recovery support services. Resources exist that can help providers point their patients in the right direction to get appropriate assistance. For instance, providers can consult with organizations, such as the American Mental Health Counselors Association (AMHCA), American Society of Addiction Medicine (ASAM), or NAADAC, the Association for Addiction Professionals, which provide training to health care professionals. Additional professional organizations can be found in the "Prevention, Treatment, and Recovery Resources" document in this toolkit. For referral options, providers can refer their local network of providers, insurance companies, and other resources such as SAMHSA's Treatment Locator (http://findtreatment.samhsa.gov) to find referral options in their local area.



- Patient uncertainty: Some patients may feel uncomfortable disclosing their behavioral health condition to a health care professional due to confidentiality fears, or because of public misconceptions that may fuel feelings of embarrassment or isolation. To help them feel more at ease, providers can use the following techniques to decrease a patient's anxiety about discussing sensitive topics:¹⁰
 - Normalize: Remind patients that many other people experience behavioral health conditions.
 - **Use transparency:** Explain the reasons why you are asking him or her about a behavioral health condition.
 - **Ask permission:** Give patients the option to discuss behavioral health conditions, as well as the option to not answer questions.
- **Time constraints:** Similar to other health care professionals, many primary care doctors lack the time to fully address the wide range of psychosocial issues that are presented by their patients. ¹¹ In fact, an average primary care physician visit lasts 10 minutes. ¹² Some screening tools for a behavioral health condition can take as little as two minutes. SAMHSA and HRSA's Center for Integrated Health Solutions (http://www.integration.samhsa.gov/clinical-practice/screening-tools) includes brief three-question screeners for a variety of behavioral health conditions. Also, provisions under the Affordable Care Act (ACA) designate funds for improving health information technology that will help paperwork to become standardized, leading to time savings and increased patient interaction that can be directed towards basic screenings. ¹³
- **Reimbursement issues:** Both health care professionals and patients are often concerned that behavioral health services might not be fully covered, if at all. However, under the ACA, many preventive screenings including screenings for depression, alcohol misuse, and behavioral problems for children of all ages must be covered without patients having to pay a copayment or co-insurance or meeting a deductible. Behavioral health treatment services also are part of "essential health benefits," which will require coverage by insurance offered in individual and small group markets as of January 1, 2014. 15
- **Safe medication prescribing and management:** With rates of prescription drug abuse on the rise, ¹⁶ health care providers may be concerned about safely managing a patient's medication regimen. Consider whether a patient has known risk factors of abuse or addiction, including:
 - Past cocaine use or history of alcohol or cannabis use;¹⁷
 - Lifetime history of a substance use disorder;¹⁸
 - o Family history of substance abuse;19
 - Heavy tobacco use;²⁰ and
 - History of severe depression or anxiety.²¹

If a patient is at higher risk of problematic prescription use, health care professionals can implement more extensive monitoring and assessment methods.²² It is imperative that practitioners continually manage their patients' opioid use. Effective management requires practitioners to regularly assess and document the benefits and harms of opioid use. With diligent prescribing, management, and monitoring, health care providers can provide patients with prescription medicines safely and effectively.

By recognizing challenges to care and finding solutions, health care providers can help their patients live healthy, productive lives.



Help Patients With a Mental Illness...

As a health care provider, it is important to learn and recognize the signs and symptoms of mental illness and refer people to specialty treatment if necessary. A patient's mental health should be observed regularly to ensure that symptoms are detected early, helping lead to an intervention or the delay or prevention of a major mental illness.²³

Screening and Diagnosis

Providers can initiate the screening process by asking patients if they have experienced any of the following symptoms:²⁴

- Little interest or pleasure in doing things;
- Feeling depressed or hopeless;
- Trouble falling or staying asleep, or sleeping too much;
- Feeling tired or having little energy;
- Poor appetite or overeating; and
- Feeling down about themselves.

Some family doctors and pediatricians are qualified to diagnose common mental disorders such as depression, anxiety disorders, or attention deficit hyperactivity disorders. Other conditions, such as schizophrenia and autism, must be evaluated and diagnosed by qualified professionals who have specialized knowledge of mental health – psychiatrists, psychologists, psychiatric nurses, social workers, or mental health counselors.²⁵

Health care professionals can consult the *Diagnostic and Statistical Manual of Mental Disorders (DSM)* to aid in diagnosing a specific mental illness. This manual classifies and describes more than 300 types of conditions, ranging from anorexia to schizophrenia.²⁶ In addition to the *DSM*, free screeners such as The Patient Health Questionnaire (PHQ) (http://www.phqscreeners.com) are available online to help health care professionals recognize common mental illness such as depression or eating disorders.

Referral

If it is suspected that a patient has a mental disorder, health care providers should direct the person to a behavioral health specialist for diagnosis and treatment. When referring a patient to medical treatment or therapy, emphasize that mental illness is common and treatment is effective. In a given year, less than one-third of adults diagnosed with a mental illness receive treatment,²⁷ so it is important to follow up with patients to ensure that they receive treatment.

Health care professionals and family members can work together to develop an appropriate plan that is tailored to an individual's needs. Common treatment options include:

- Psychotherapy;²⁸
- Medication therapy;²⁹
- Support groups;³⁰ and
- Peer specialists or other recovery support programs. 31



Refer to the "Treatment and Recovery" section of this toolkit for further information about these treatment options. Also visit SAMHSA's Treatment Locator (http://findtreatment.samhsa.gov) or the "Prevention, Treatment, and Recovery Resources" portion of this toolkit for more detailed information on local behavioral health treatment organizations.

Help Patients With a Substance Use Disorder...

Primary care providers, as well as professionals in emergency care, trauma care, and community health settings, can use SAMHSA's Screening, Brief Intervention, and Referral to Treatment (SBIRT) Model (http://www.samhsa.gov/prevention/sbirt) to support patients with a behavioral health condition. SBIRT is an integrated public health approach to early screening and intervention for individuals with risky alcohol and drug use, and if needed, timely referral to more intensive substance abuse treatment.³² The approach includes the following steps:³³

- **1. Screening:** Determine whether patients are engaging in risky behavior that warrants intervention. This screening process typically takes 5 to 10 minutes. Commonly used screening tools, which are simple and easy to administer, are:
 - Alcohol Use Disorders Identification Test (AUDIT)
 - Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST)
 - Drug Abuse Screening Test (DAST)
 - Cut Down, Annoyed, Guilty, Eye-Opener Substance Abuse Screening Test (CAGE)
- **2. Brief intervention:** Depending on a patient's needs, providers should conduct a brief intervention that usually involves one to five sessions lasting about five minutes to one hour. The goal of brief intervention is to educate patients, increase their motivation to reduce risky behavior, address long-standing problems with harmful drinking and/or drug misuse, and urge patients to obtain more long-term care.
- **3. Referral to treatment:** Referral is recommended when patients meet the diagnostic criteria for substance dependence as defined by the *DSM*. Only three to four percent of screened patients in a primary care setting typically need to be referred, and this action can be critical in helping patients get appropriate and timely care before their conditions worsen.³⁴

In addition to becoming acclimated with the screening tools listed in step one, health care providers should be familiar with the signs and symptoms of substance use disorders, outlined in the "Overview" and "Young Adults" section of this toolkit.

With a commitment to screening, intervention, and referral, health care professionals can make a difference in their patients' lives.



Make a Difference During Recovery Month and Throughout the Year...

Health care providers can help spread **Recovery Month's** message every September and throughout the year. Consider taking the following steps:

- Seek volunteer and speaking opportunities: Health care providers who are equipped with the clinical knowledge and tools to prevent, detect, and treat mental and/or substance use disorders are valuable assets to all communities. Consider volunteering in underserved communities or speak at local schools and community groups about the importance of prevention and the positive effects of treatment and recovery on one's overall health and well-being.
- Attend trainings or continuing education courses: As with any health condition, trends and research
 surrounding behavioral health disorders constantly evolve. By staying current on these topics, health care
 providers can more effectively screen, assess, intervene, and refer individuals in need of treatment services.
- **Join in the celebration:** For patients in recovery, recognize their accomplishments and encourage them to continue to participate in support services, seek help whenever they may need it, and continue on their recovery journey one day at a time.

Additional Resources...

A variety of resources provide additional information on **Recovery Month** and/or mental and substance use disorders, as well as prevention, treatment, insurance enrollment information, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (http://www.samhsa.gov):** Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.
- **SAMHSA's ADS Center (http://www.stopstigma.samhsa.gov):** Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- SAMHSA's Fetal Alcohol Spectrum Training/Center for Excellence (http://fasdcenter.samhsa.gov/education Training/EducationTraining.aspx): Provides education and training resources to help health care professionals prevent and treat fetal alcohol syndrome.



- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- National Institute on Alcohol Abuse and Alcoholism (NIAAA) "Alcohol Screening and Brief Intervention
 for Youth: A Practitioner's Guide" (http://www.niaaa.nih.gov/Publications/EducationTrainingMaterials/Pages/
 YouthGuide.aspx): Helps health care professionals quickly identify youth at risk for alcohol-related problems.
- American Academy of Addiction Psychiatry (http://www2.aaap.org): Promotes accessibility of quality treatment for all who need it, educates the public to influence public policy regarding addictive illness, and provides continuing education for addiction professionals.
- American Psychiatric Association (http://www.psych.org): Works to ensure that humane care and effective
 treatment is given to anyone with a mental illness, including those with intellectual disabilities and substance
 use disorders.
- American Medical Association's (AMA's) Office of Alcohol and Other Drug Abuse (http://www.ama-assn.org/ama/pub/physician-resources/public-health/promoting-healthy-lifestyles/alcohol-other-drug-abuse.shtml):
 Provides an array of resources on alcohol and other substances, including facts and policies, treatment and referral resources, and professional intervention details.
- American Society of Addiction Medicine (http://www.asam.org): Serves addiction health care professionals, aiming to improve the care and treatment of people with the disease of addiction and advance the practice of addiction medicine.
- International Association of Peer Supporters (http://na4ps.wordpress.com/mission): Promotes the inclusion of peer supporters throughout mental and behavioral health systems worldwide.
- Mental Health America (http://www.mentalhealthamerica.net): Offers resources about the realities of mental health and mental illness.
- NAADAC, The Association for Addiction Professionals (http://www.naadac.org/index.php): Membership association that serves addiction counselors, educators, and other addiction-focused health care professionals who specialize in addiction prevention, treatment, recovery support, and education.
- Psychology Today's Therapy Directory (http://therapists.psychologytoday.com/rms): Allows users to
 locate a therapist, psychologist, or counselor who specializes in mental illness by city or zip code throughout
 the United States.

Use the following resources to learn about the impact of health reform on access to prevention, treatment, and recovery support services:

- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral health care executives, CEOs, and directors, including health care insurance enrollment training information.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment, and recovery support needs of the public.



- **Healthcare.gov (http://www.healthcare.gov/index.html):** Contains information on finding health insurance options, help using insurance, information on the Affordable Care Act, help comparing providers, and information on prevention and wellness resources.
- Kaiser Family Foundation (http://www.kff.org/healthreform/upload/8061.pdf): Issued by a non-profit health policy and communications group, this document provides a summary of the comprehensive health reform law. It discusses the law and its provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation's Health Reform Source (http://healthreform.kff.org) for more information.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.
- The Parity Implementation Coalition's Parity Toolkit (http://www.facesandvoicesofrecovery.org/pdf/final_parity_toolkit.pdf): Created by organizations including the *Recovery Month* Planning Partners, this toolkit aids individuals seeking help and individuals in recovery, as well as their families, providers, and advocates, in understanding their rights and benefits under the Mental Health Parity and Addiction Equity Act.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



Sources:

- ¹ Substance Abuse and Mental Health Services Administration, Leading Change: A Plan for SAMHSA's Roles and Actions 2011-2014. HHS Publication No. (SMA) 11-4629. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2011, p. 65.
- ² Parks, J. et al. (2006). Morbidity and Mortality in People with Serious Mental Illnesses. National Association of State Mental Health Program Directors (NASMHPD) Medical Directors Council, Alexandria, VA.
- ³ National Council on Alcoholism and Drug Dependence. (n.d). Stories of Hope, Help and Healing. Retrieved September 19, 2012, from http://www.ncadd.org/index.php/get-help/recovery-
- ⁴ Collins, C., Hewson, D., Munger, R., and Wade T. (2010). Evolving Models of Behavioral Health Integration in Primary Care. Milbank Memorial Fund. Retrieved September 19, 2012, from http://www.milbank.org/reports/10430EvolvingCare/EvolvingCare.pdf, p. 12-13.
- ⁵ National Alliance on Mental Illness. (2003). *Dual Diagnosis and Integrated Treatment of Mental Illness and Substance Abuse Disorder.* Retrieved September 21, 2012, from http://www.nami.org/Content/ContentGroups/Helpline1/Dual_Diagnosis_and_Integrated_Treatment_of_Mental_Illness_and_Substance_Abuse_Disorder.htm.
- ⁶ Center for Substance Abuse Treatment. Substance Abuse Treatment for Persons With Co-Occurring Disorders. Treatment Improvement Protocol (TIP) Series 42. DHHS Publication No. (SMA) 05-3992. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2005. Retrieved on December 13, 2012, from http://www.ncbi.nlm.nih.gov/books/NBK64197/pdf/TOC.pdf, p. xix.
- ⁷ Substance Abuse and Mental Health Services Administration, Leading Change: A Plan for SAMHSA's Roles and Actions 2011-2014. HHS Publication No. (SMA) 11-4629. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2011, p. 67.
- ⁸ Substance Abuse and Mental Health Services Administration. (2012). SAMHSA's Wellness Initiative Information for General Health Care Providers. Retrieved September 19, 2012, from http://store.samhsa.gov/shin/content//SMA12-4566/SMA12-4566.pdf.
- 9 Anderson, P., Aromaa, S., Rosenbloom, D., Enos, G. (2008). Screening & Brief Intervention: Making a Public Health Difference Report. Retrieved September 19, 2012, from http://www.jointogether.org/aboutus/ourpublications/pdf/sbi-report.pdf, p. 7.
- ¹⁰ McBride, R. (2010). Talking to Patients About Sensitive Topics: Techniques for Increasing the Reliability of Patient Self-report. Retrieved September 19, 2012, from http://www.drugabuse.gov/sites/default/files/sensitive-topics-handout_0.pdf, p 14.
- ¹¹ Collins, C., Hewson, D., Munger, R., and Wade T. (2010). Evolving Models of Behavioral Health Integration in Primary Care. Milbank Memorial Fund. Retrieved September 19, 2012, from http://www.milbank.org/reports/10430EvolvingCare/EvolvingCare.pdf, p. 1.
- 12 Yawn, B., Goodwin, M.A., Zyzanski, S. J., and Stange, K. (2003). Time Use During Acute and Chronic Illness Visits to a Family Physician. Family Practice, 20(4), 474–7.
- 13 Substance Abuse and Mental Health Services Administration. (2010). Strategic Initiative #6: Health Information Technology, Electronic Health Records and Behavioral Health. Retrieved September 19, 2012, from http://www.samhsa.gov/about/siDocs/healthIT.pdf, p. 1-2.
- ¹⁴ Substance Abuse and Mental Health Services Administration. (2011). Prevention in Health Reform Affordable Care Act Prevention Timeline. Retrieved September 19, 2012, from http://www.samhsa.gov/healthReform/prevention.aspx.
- ¹⁵ Office of the Assistant Secretary for Planning and Evaluation. U.S. Department of Health and Human Services. (2011). Essential Health Benefits: Individual Market Coverage. Retrieved September 19, 2012, from http://aspe.hhs.gov/health/reports/2011/IndividualMarket/ib.pdf.
- ¹⁶ National Institute on Drug Abuse. (2011). Research Reports: Prescription Drugs: Abuse and Addiction. Retrieved September 19, 2012, from http://www.drugabuse.gov/publications/research-reports/prescription-drugs/director.
- ¹⁷ Ives, T., et al. (2006). Predictors of Opioid Misuse in Patients with Chronic Pain: A Prospective Cohort Study. BMC Health Services Research 2006, 6(46). Retrieved February 14, 2013, from http://www.biomedcentral.com/1472-6963/6/46/about.
- ¹⁸ Michna, M., et al. (2004). Predicting Aberrant Drug Behavior in Patients Treated for Chronic Pain: Importance of abuse history. Journal of Pain and Symptom Management, 28(3), 255. Retrieved February 14, 2013, from http://download.journals.elsevierhealth.com/pdfs/journals/0885-3924/PIIS0885392404001915.pdf.
- ¹⁹ Michna, M., et al. (2004). Predicting Aberrant Drug Behavior in Patients Treated for Chronic Pain: Importance of abuse history. *Journal of Pain and Symptom Management*, 28(3), 255. Retrieved February 14, 2013, from http://download.journals.elsevierhealth.com/pdfs/journals/0885-3924/PIIS0885392404001915.pdf.
- ²⁰ Akbik, H., et al. (2006). Validation and Clinical Application of the Screener and Opioid Assessment for Patients with Pain (SOAPP). Journal of Pain and Symptom Management, 32(3), 288. Retrieved February 14, 2013, from http://download.journals.elsevierhealth.com/pdfs/journals/0885-3924/PIIS0885392406003472.pdf.
- ²¹ Akbik, H., et al. (2006). Validation and Clinical Application of the Screener and Opioid Assessment for Patients with Pain (SOAPP). Journal of Pain and Symptom Management, 32(3), 288. Retrieved February 14, 2013, from http://download.journals.elsevierhealth.com/pdfs/journals/0885-3924/PIIS0885392406003472.pdf.
- ²² Gourlay, D., Heit, H., and Almahrezi , A. (2005). Universal Precautions in Pain Medicine: A Rational Approach to the Treatment of Chronic Pain. *Pain Medicine*, 6(2), 107-112. Retrieved February 14, 2013, from http://onlinelibrary.wiley.com/doi/10.1111/j.1526-4637.2005.05031.x/full.
- ²³ American Psychiatric Association. (2009). Let's Talk Facts About: Warning Signs of Major Mental Illness. Retrieved September 19, 2012, from http://www.healthyminds.org/Document-Library/Brochure-Library/Warning-Signs-of-Major-Mental-Illnesses.aspx.
- 24 Pfizer. (2005). Patient Health Questionnaire (PHQ-9). Retrieved September 19, 2012, from http://www.integration.samhsa.gov/images/res/PHQ%20-%20Questions.pdf.
- ²⁵ National Institute of Mental Health. (n.d.). Teachers Guide. Information about Mental Illness and the Brain. Retrieved September 19, 2012, from http://science.education.nih.gov/supplements/nih5/mental/quide/info-mental-a.htm.



- ²⁶ American Psychiatric Association. (2012). Diagnostic and Statistical Manual. Retrieved September 19, 2012, from http://www.psych.org/mainmenu/research/dsmiv.aspx
- ²⁷ U.S. Department of Health and Human Services. (1999). Mental Health: A Report of the Surgeon General. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, pp. 408-409, 411.
- 28 National Institute of Mental Health. (2012). Psychotherapies. Retrieved September 19, 2012, from http://www.nimh.nih.gov/health/topics/psychotherapies/index.shtml.
- ²⁹ National Alliance on Mental Health. (n.d.). What is Mental Illness Mental Illness Facts. Retrieved September 19, 2012, from http://www.nami.org/Content/NavigationMenu/Inform_Yourself/About_Mental_Illness/About_Mental_Illness.htm.
- 30 Mental Health America. (2012). How Do I Find a Local Support Group? Retrieved September 19, 2012, from http://www.mentalhealthamerica.net/go/find_support_group.
- ³¹ Valentine, P., White, W., Taylor, P. (2007). The Recovery Community Organization: Toward A Working Definition and Description. Retrieved September 19, 2012, from http://www.facesandvoicesofrecovery.org/pdf/valentine_white_taylor_2007.pdf, p. 1.
- ²² Substance Abuse and Mental Health Services Administration. (2011). Screening, Brief Intervention and Referral to Treatment (SBIRT) in Behavioral Healthcare. Retrieved September 19, 2012, from http://www.samhsa.gov/prevention/sbirt/SBIRTwhitepaper.pdf, p. 2.
- ³³ Substance Abuse and Mental Health Services Administration. (2011). Screening, Brief Intervention and Referral to Treatment (SBIRT) in Behavioral Healthcare. Retrieved September 19, 2012, from http://www.samhsa.gov/prevention/sbirt/SBIRTwhitepaper.pdf.
- ³⁴ Substance Abuse and Mental Health Services Administration. (2011). Screening, Brief Intervention and Referral to Treatment (SBIRT) in Behavioral Healthcare. Retrieved September 19, 2012, from http://www.samhsa.gov/prevention/sbirt/SBIRT\whitepaper.pdf, p. 6.

Families and Caregivers of Young People

"I am grateful for my family for intervening early and providing support and resources for me to seek help."

Chris Budnick Vice President of Programs, The Healing Place of Wake County Raleigh, NC Family

Help

qesqect

Engagement

Belonging

join the voices for recovery

COETIE

on pathways to wellness



FAMILIES AND CAREGIVERS OF YOUNG PEOPLE

Family members and caregivers often form the front lines in promoting prevention, treatment, and recovery from mental and/or substance use disorders. Traditional and non-traditional families – including parents, grandparents, other relatives, life partners, and unrelated individuals who inherit or adopt caretaking responsibilities – often want to know how and when to help a young person in need.

To encourage families and caregivers to seek support and resources, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **National Recovery Month (Recovery Month).** Each September, this national observance increases awareness and understanding of mental and substance use disorders, and promotes that behavioral health is essential to health, prevention works, treatment is effective, and people recover.

The 2013 **Recovery Month** theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life. The 24th annual **Recovery Month** celebrates the journey family members and caregivers take to help a young person on a pathway to wellness.

This document shares how to create an environment supportive of behavioral health and wellness. It also outlines ways to treat current issues, as well as how to access critical prevention, treatment, and recovery support resources.

Prevent Mental and Substance Use Disorders...

Mental and substance use disorders occur throughout the United States, in people of all ages, races, ethnicities, and genders. In light of how common these conditions are, many family members and caregivers find it challenging to raise a child or support a loved one in a constructive, safe environment. This can be difficult as they strive to balance work, social lives, and their own wellness each day.

However, research shows that a caring adult can make a difference in a young person's life. Adults who interact with young people in an open, warm manner can raise kids with higher self-esteem, better performance in school, and fewer negative outcomes such as depression or later substance use than those who do not.¹ To do so, it's important to make the young person feel loved or wanted, which increases feelings of connectedness.² This, in turn, opens the lines of communication.

SAMHSA's Building Blocks for a Healthy Future (http://www.bblocks.samhsa.gov) website provides tips to help children or loved ones make healthy decisions as they grow up. It offers ideas for conversation starters, positive discipline, and family activities. SAMHSA's Too Smart to Start (http://www.toosmarttostart.samhsa.gov/Start.aspx) website helps youth, families, educators, and communities prevent underage alcohol use and its related problems.

While it's important to start this conversation at a young age, youth attitudes may evolve about behavioral health issues as children get older,³ requiring family members and caregivers to adapt the way they communicate with an older child or teenager. Despite their preferences for privacy and independence, youth and teenagers respond to prevention messages. In 2011, youths aged 12 to 17 who believed their parents would strongly disapprove of their using a specific substance were less likely to use that substance than were youths who believed their parents would somewhat disapprove or neither approve nor disapprove.⁴



When establishing a connection with someone, it may help to acknowledge your own shared experiences if the young person brings it up, but keep the focus of the conversation primarily on the young person's current challenges. Consider the following tips when talking with a young person or teenager:

- Be a good listener and encourage young people to be open and willing to share.
- Respect their privacy, as teenagers may become more inviting if you understand or respect their need for space.
- Give them increased autonomy, to assist in building trust.
- Accept their feelings.
- Apologize when you are wrong.

There are other ways to make connections and promote wellness. Since behavioral health is closely linked to physical health, take the opportunity to help young people eat nutritiously and stay healthy. In addition to talking openly about behavioral health issues, stay active in a young person's school activities by participating in parent-teacher conferences and other school events and extracurricular activities.

Recognize the Signs and Symptoms...

Prevention is essential, but what happens when a child or teenager starts to exhibit signs of unusual behavior or emotional distress? Do you know how to recognize these signs? What if your child or loved one has developed a co-occurring disorder, one that involves both mental and substance use disorders – how would you know?

In some cases, family members and caregivers are often the first to see symptoms that may be caused by mental and/or substance use disorders, as well as signs of other physical illnesses. However, the exact nature of the problem isn't always obvious. For example, people who experience mental illness may manage their illness by abusing substances, leading to misdiagnosis, or distorting the root cause of a person's behavioral health disorder.⁶

Despite this complexity, being aware of behavioral cues can help you determine if a young person in your life needs help. The following signs and symptoms could be attributable to a mental illness, but may also indicate other problems, such as a substance use disorder:⁷

- **Young children:** Changes in school performance, poor grades despite strong efforts, excessive worry or anxiety, hyperactivity, persistent nightmares, continual disobedience or aggression, and frequent temper tantrums.
- Older children and pre-adolescents: Substance use; inability to cope with problems and daily activities; changes in sleeping and/or eating habits; excessive complaints of physical ailments; defiance of authority; truancy, theft, and/or vandalism; intense fear of weight gain; prolonged negative mood, often accompanied by poor appetite or thoughts of death; and frequent outbursts of anger.
- Adolescents: Feelings of sadness, hopelessness, or worthlessness; prolonged grief after a loss or death; excessive feelings of anger or worry; alcohol or drug use; exercising, dieting, or binge-eating obsessively; hurting others or destroying property; doing reckless things that may result in self-harm or harm to others.

Other signs may be unique to substance abuse, including bloodshot eyes or dilated pupils, slurred speech, or disappearing money, valuables, or prescriptions from your home.⁸

Remember that not all signs and symptoms are obvious, and there are a host of reasons that a child, teenager, or young adult may be experiencing these symptoms other than mental and/or substance use disorders.



Take the Right Steps...

Family members and caregivers are critical to intervening to help a loved one with a mental and/or substance use disorder.

If you suspect a preteen or teen is using drugs or alcohol or may have a mental illness, it's important to take action right away, just as you would seek treatment for any other illness or injury. Casual substance use can quickly turn into a long-term problem, and it can also be indicative of a person trying to cope with a mental illness. Following are ways you and other family members can intervene if you suspect someone has a mental and/or substance use disorder:

- Discuss household rules, such as curfews, that may help prevent the occurrence of mental and/or substance use disorders;⁹
- Express your concern and support;¹⁰
- Ask what you can do to help;¹¹
- Seek outside help and support from a teacher, neighbor, or coach, if necessary;¹²
- Have productive conversations by remaining calm, sharing your concerns, and listening; 13
- Reassure your loved one that you care about him/her;¹⁴
- Find out if the person is getting the care that he or she needs and wants;¹⁵
- Observe behavior and activities, such as helping out with homework or chores;¹⁶ and
- Dispose of unwanted or unused prescription medications so there are no unnecessary medications in the home.

Monitoring activities are proven to work. In 2011, past-month use of illicit drugs and cigarettes and binge alcohol use were lower among youths aged 12 to 17 who said that their parents were engaged in monitoring behaviors than among youths whose parents seldom or never engaged in such behaviors.¹⁷

Some people are more at risk for mental and/or substance use disorders than others, such as those who have experienced traumatic events. It is important for family members and caregivers to learn techniques to help young people cope with tragedies such as a death in the family, physical or sexual abuse, or a natural disaster. The SAMHSA-funded National Child Traumatic Stress Network (http://www.nctsnet.org) provides resources for overcoming these challenges.

It is also important to remember that people may have different needs for care; those who exhibit signs that they may harm themselves or others may require more intensive treatment or immediate help. If you think a young person is at risk of suicide, contact the National Suicide Prevention Lifeline – 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org). More options for mental and substance use disorder prevention, treatment, and recovery support can be found in the "Treatment and Recovery" section of this toolkit.

If you are unsure of what to do, call **SAMHSA's National Helpline – 1-800-662-HELP (4357) –** or visit SAMHSA's Treatment Locator (http://findtreatment.samhsa.gov), which offers 24-hour, free, and confidential information and treatment referrals for both mental and substance use disorders.



Family members and caregivers can also seek help for mental and/or substance use disorders by contacting the following:¹⁸

- A local health or state department's mental health division or substance use disorder agency (refer to the "Single-State Agency" section of this toolkit for resources);
- A family physician;
- A clergyperson;
- Family services agencies, such as Catholic Charities, Family Services, or Jewish Social Services;
- Educational consultants or school counselors;
- Marriage and family counselors; and
- Child guidance counselors.

When trying to help a loved one, remember that you are not alone. There are resources and trained professionals available to help guide you on finding the appropriate pathway to wellness.

Take Care of Yourself...

Dealing with the impact of a mental and/or substance use disorder can take a toll on a family member or caregiver. Keep in mind that you also need time to heal and take care of your own wellness. Consider taking the following steps:¹

- Accept your feelings and know that behavioral health conditions are common.
- Ask a physician or counselor questions about what to expect and whether certain behaviors that may seem foreign to you are normal for someone with a behavioral health problem.
- Establish a social network. If you feel uncomfortable talking to a friend about your situation, join a support group to share with others who are experiencing similar situations.
- Seek the services of a counselor or trained professional with whom you feel comfortable.

'Mental Health America. (n.d.). Mental Illness and the Family: Recognizing Warning Signs and How to Cope. Retrieved September 28, 2012, from http://www.nmha.org/go/information/get-info/mi-and-the-family/recognizing-warning-signs-and-how-to-cope.



Continue on Pathways to Wellness...

For many young people with mental and/or substance use disorders, their path to wellness can be traced back to the steps that were enacted by a family member or caregiver. Perhaps a family member or caregiver was instrumental in promoting healthy lifestyles and spreading the belief that behavioral health is essential to health. They may have provided healthy meals, encouraged a good night's sleep, ensured that the young person has health insurance coverage, and challenged a young person to stay active and physically fit.

These activities, combined with a family member or caregiver's ability to form a connection with a young person and recognize the signs of mental and substance use disorders, can help lead young people to their path to wellness.

Refer to the "Join the Voices for Recovery" section of this toolkit for real-life examples of how family members and caregivers are making a difference in a loved one's life and learning how to cope themselves.

Make a Difference During Recovery Month and Throughout the Year...

There are many ways to help a family member or loved one during **Recovery Month.** Consider taking the following steps:

- **Foster a healthy environment.** Inspire your loved one to eat well, rest, exercise, and attend recovery appointments and meeting commitments. Remind him or her that recovery is a top priority.
- Offer encouragement. Let your loved one know how much he or she means to you. Share words of hope that life in recovery is possible, and that professionals can help to manage a mental and/or substance use disorder.
- **Recognize accomplishments.** Tell your family member or loved one that he or she is brave and that you are proud be a part of their recovery journey.

Additional Resources...

A variety of resources provide additional information on **Recovery Month** and/or mental and substance use disorders, as well as prevention, treatment, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (http://www.samhsa.gov):** Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.



- SAMHSA's Family Centered Substance Abuse Treatment Grants (http://www.samhsa.gov/grants/2010/TI-10-002.aspx): Support the implementation of evidence-based procedures, and were developed to provide substance abuse resources to adolescents and their families, or other primary caregivers, in areas with unmet needs, such as substance abuse prevention and treatment services.
- SAMHSA's Children's and Family's Health Transitions (http://www.samhsa.gov/Budget/FY2012/SAMHSA-FY12CJ.pdf): Uses a coordinated approach to provide an easy transition to adulthood for youth and young adults with mental illness, as well as to support their families.
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- Technical Assistance Centers: Maximizes self-determination and recovery and assists people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
 - National Consumer Supporter Technical Assistance Center at Mental Health America (http://www.ncstac.org);
 - National Empowerment Center (http://www.power2u.org);
 - National Mental Health Consumers' Self-Help Clearinghouse (http://www.mhselfhelp.org);
 - The Family Café (http://familycafe.net); and
 - The STAR Center (http://www.consumerstar.org/index.html).
- Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS): Provides policy and practice analysis, as well as training and technical assistance, to states, providers, and systems to increase the adoption and implementation of recovery supports with behavioral health issues.
- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral healthcare executives, CEOs, and directors, including health care insurance enrollment training information.
- Building Blocks for a Healthy Future (http://www.bblocks.samhsa.gov): Educates parents and caregivers about the basics of prevention in order to promote a healthy lifestyle.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment and recovery support needs of the public.
- Healthcare.gov (http://www.healthcare.gov/index.html): Contains information on finding health insurance
 options, help using insurance, information on the Affordable Care Act, help comparing providers, and information
 on prevention and wellness resources.



- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.
- **Teen Challenge International (http://teenchallengeusa.com):** Provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



Sources:

¹American Psychological Association. (n.d.). Parents and Caregivers are Essential to Children's Healthy Development. Retrieved September 28, 2012, from http://www.apa.org/pi/families/resources/parents-caregivers.aspx.

²U.S. Department of Health and Human Services (HHS) Office of the Surgeon General and National Action Alliance for Suicide Prevention. 2012 National Strategy for Suicide Prevention: Goals and Objectives for Action. Washington, DC: HHS, September 2012, http://www.surgeongeneral.gov/library/reports/national-strategy-suicide-prevention/full_report-rev.pdf, p.139.

³U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (n.d.). Too Smart to Start. Tips on Talking to Teens and Tweens. Retrieved September 28, 2012, from http://www.toosmarttostart.samhsa.gov/families/talking/default.aspx.

⁴Substance Abuse and Mental Health Services Administration. Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 68.

⁵Purcell, M. (2006). How to Talk With Your Teenagers, Not at Them. *Psych Central*. Retrieved September 28, 2012, from http://psychcentral.com/lib/2006/how-to-talk-with-your-teenagers-not-at-them.

°National Alliance on Mental Health. (n.d.). Substance Abuse and Co-Occurring Disorders. Retrieved October 8, 2012, from http://www.nami.org/Content/NavigationMenu/Hearts_and_Minds/Smoking_Cessation/Substance_Abuse_and_Co-occurring_Disorders.htm.

⁷Mental Health America. (n.d.). Mental Illness and the Family: Recognizing Warning Signs and How to Cope. Retrieved September 28, 2012, from http://www.nmha.org/go/information/get-info/mi-and-the-family/recognizing-warning-signs-and-how-to-cope.

⁸HelpGuide: A Trusted Non-Profit Resource. (n.d.). Drug Abuse and Addiction: Signs, Symptoms, and Help for Drug Problems and Substance Abuse. Retrieved September 28, 2012, from http://helpguide.org/mental/drug_substance_abuse_addiction_signs_effects_treatment.htm.

The Partnership at Drugfree.org. (n.d.). Intervene. Don't panic. You can do this. Retrieved September 28, 2012, from http://www.drugfree.org/intervene.

10U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2006). What a Difference a Friend Makes. Retrieved September 28, 2012, from www.whatadifference.samhsa.gov/docs/NASC.pdf, p. 6.

11U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2006). What a Difference a Friend Makes. Retrieved September 28, 2012, from www.whatadifference.samhsa.gov/docs/NASC.pdf, p. 6.

12The Partnership at Drugfree.org. (n.d.). Intervene. Don't panic. You can do this. Retrieved September 28, 2012, from http://www.drugfree.org/intervene.

13The Partnership at Drugfree.org. (n.d.). Intervene. Don't panic. You can do this. Retrieved September 28, 2012, from http://www.drugfree.org/intervene.

14U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2006). What a Difference a Friend Makes. Retrieved September 28, 2012, from www.whatadifference.samhsa.gov/docs/NASC.pdf, p. 6.

¹⁵U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2006). What a Difference a Friend Makes. Retrieved September 28, 2012, from www.whatadifference.samhsa.gov/docs/NASC.pdf, p. 6.

16The Partnership at Drugfree.org. (n.d.). Intervene. Don't panic. You can do this. Retrieved September 28, 2012, from http://www.drugfree.org/intervene.

¹⁷Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 71.

¹⁸Mental Health America. (n.d.). Mental Illness and the Family: Finding the Right Mental Health Care for You. Retrieved September 28, 2012, from http://www.nmha.org/go/information/get-info/mi-and-the-family/finding-the-right-mental-health-care-for-you.

Common Mental Disorders and Misused Substances

"Speaking together, we can change the conversation on addiction and recovery and, in so doing, pave the way for healthier and safer individuals, families, and communities."

Peter Gaumond

Health Prevention

Treatment

Help

join the voices for recovery

OPE On pathways to wellness



COMMON MENTAL DISORDERS AND MISUSED SUBSTANCES

The impact of mental and substance use disorders spans across individuals, families, and communities. Learning about some of the most common mental disorders and misused substances can help people recognize the signs of behavioral health conditions and ultimately seek help. This aligns with the aim of **National Recovery Month** (**Recovery Month**), an initiative to raise awareness about the many resources available to help prevent these conditions and encourage treatment and recovery. **Recovery Month** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov).

In 2011, 21.6 million Americans aged 12 or older (8.4 percent) needed treatment for an illicit drug or alcohol use problem.¹ Of these individuals, only 2.3 million (10.8 percent of those who needed treatment) received treatment at a specialty facility.² Additionally, among 45.6 million Americans aged 18 and older who experienced any mental illness in 2011, 31.6 million received mental health services during the past 12 months.³

Included in this document are key statistics about common mental illnesses and substances that are often misused. Also included are alternative names for each disorder or substance; signs, symptoms, and adverse health effects; prevalence; and average age of onset (or age of first-time use of a substance). Information in the following charts was collected from SAMHSA's 2011 National Survey on Drug Use and Health, as well as reports and data released by The Partnership at DrugFree.Org, the National Institute of Mental Health, and the National Institute on Drug Abuse.

The following chart includes information on common mental disorders:

Mental Disorder	Signs & Symptoms ^{4,5,6}	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old) ^{7,8,9}	Average Age of Onset ¹⁰
Anxiety Disorders			
Agoraphobia	Intense fear and anxiety of any place or situation where escape might be difficult; avoidance of being alone outside of the home; fear of traveling in a car, bus, or airplane, or of being in a crowded area	2.4 percent of youth; 1.4 percent of adults	20 years old
Generalized Anxiety Disorder	An overwhelming sense of worry and tension; irritability; physical symptoms including fatigue, headaches, muscle tension, muscle aches, trouble swallowing, trembling, twitching, sweating, lightheadedness, nausea, and hot flashes	1.0 percent of youth; 5.7 percent of adults	31 years old



Mental Disorder	Signs & Symptoms ^{4,5,6}	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old) ^{7,8,9}	Average Age of Onset ¹⁰
Anxiety Disorders			
Obsessive Compulsive Disorder (OCD)	Persistent and unwelcome anxious thoughts or "obsessions," often accompanied by rituals that are performed to try to prevent or get rid of them, called "compulsions"	(youth data not available); 1.6 percent of adults	19 years old
Panic Disorder	Feelings of sudden terror that often occur with a pounding heart, sweating, nausea, chest pain, faintness, or dizziness; an avoidance of places or situations where panic attacks have occurred	2.3 percent of youth; 4.7 percent of adults	24 years old
Post-Traumatic Stress Disorder (PTSD)	Relived trauma after experiencing a terrifying event, through nightmares or disturbing thoughts throughout the day; feelings of detachment, numbness, irritability, or aggressiveness	4.0 percent of youth; 6.8 percent of adults	23 years old
Social Phobia	Intense feelings of anxiety and dread about social situations; a persistent fear of being watched and judged by others and being humiliated or embarrassed by the person's own actions; physical symptoms such as blushing, profuse sweating, trembling, nausea, and difficulty talking	5.5 percent of youth; 12.1 percent of adults	13 years old
Specific Phobia	Marked and persistent fear and avoidance of a specific object or situation, such as a fear of heights, spiders, or flying	15.1 percent of youth; 12.5 percent of adults	7 years old
Mood Disorders			
Bipolar Disorder	Recurrent episodes of highs (mania) and lows (depression) in mood, changes in energy and behavior, extreme irritable or elevated mood, an inflated sense of self-importance, risky behaviors, distractibility, increased energy, and a decreased need for sleep	3.0 percent of youth; 3.9 percent of adults	25 years old



Mental Disorder	Signs & Symptoms ^{4,5,6}	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old) ^{7,8,9}	Average Age of Onset ¹⁰
Mood Disorders			
Major Depressive Disorder	A pervading sense of sadness and/or loss of interest or pleasure in most activities that interferes with the ability to work, study, sleep, and eat; negative impact on a person's thoughts, sense of self-worth, energy, and concentration	11.2 percent of youth; 16.5 percent of adults	32 years old
Other Mental Disorder	s		
Attention-Deficit/ Hyperactivity Disorder (ADD/ADHD)	Inattention or difficulty staying focused; hyperactivity, or constantly being in motion or talking; impulsivity, meaning often not thinking before acting	9.0 percent of youth; 8.1 percent of adults	7 years old
Personality Disorder	Difficulties dealing with other people and participating in social activities; inflexibility, rigidity, and inability to respond to change; deeply ingrained, inflexible patterns of relating, perceiving, and thinking that cause distress or impaired functioning	(youth data not available) 9.1 percent of adults*	Not available
Schizophrenia	Hearing voices or believing that others are trying to control or harm the person; hallucinations and disorganized speech and behavior, causing individuals to feel frightened, anxious, and confused	(youth data not available) 1.1 percent of adults*	Not available

^{*}Indicates 12-month prevalence



The following chart includes information on commonly misused substances:

Substance	Other Names 11,12,13	Negative Immediate Intoxication Effects ^{14,15}	Negative Health Effects ^{16,17}	Average Age of First Use in 2011 (vs. in 2010) Among People Aged 12 to 49; Current Rate Among Youths (12-17) ¹⁸	Number of People (Aged 12 or Older) Who Used it in the Past Month in 2011 (vs. in 2010) ^{19,20}
Alcohol, To	bacco, and Inha	alants			
Alcohol Disorder	Booze, beer, wine, liquor	Dizziness, talkativeness, slurred speech, disturbed sleep, nausea, vomiting, impaired judgment and coordination, increased aggression	Brain and liver damage, depression, liver and heart disease, hypertension, fetal damage (in pregnant women)	17.1 years (17.2 years in 2010) among people aged 12 to 49; rate of current use among youths is 13.3 percent	133.4 million people (similar to 131.3 million people in 2010)
Gases, Nitrites, and Aerosols (Inhalants)	Ether, chloroform, nitrous oxide, isobutyl, isoamyl, poppers, snappers, whippets, laughing gas	Increased stimulation, loss of inhibition, headache, nausea, vomiting, slurred speech, loss of motor coordination, wheezing, cramps, muscle weakness	Memory impairment, damage to cardiovascular and nervous systems, unconsciousness	16.4 years (16.3 years in 2010) among people aged 12 to 49; rate of current use among youths is 0.9 percent	600,000 people (same number as in 2010)
Tobacco Products	Cigarettes, cigars, smokeless tobacco, snuff, spit tobacco, chew	Increased blood pressure and heart rate	Chronic lung disease; coronary heart dis- ease; stroke; cancer of the lungs, larynx, esophagus, mouth, and bladder; poor pregnancy outcomes	17.2 years (17.3 years in 2010) among people aged 12 to 49; rate of current use among youths is 10.0 percent	68.2 million people (similar to 69.6 million people in 2010)
Illicit Drug	s				
Cocaine	Blow, bump, C, candy, Charlie, coke, crack, flake, rock, snow, toot, white lady	Increased alertness, attention, and energy; dilated pupils; increased temperature, heart rate, and blood pressure; insomnia; loss of appetite; feelings of restlessness, irritability, and anxiety	Weight loss, cardiovascular complications, stroke, seizures	20.1 years (21.2 years in 2010) among people aged 12 to 49; rate of current use among youths is 0.3 percent	1.4 million people (similar to 1.5 million people in 2010)
Ecstasy	Adam, E, eve, decadence, M&M, roll, X, XTC	Involuntary tooth clenching, a loss of inhibitions, transfixion on sights and sounds, nausea, blurred vision, chills, sweating, increased heart rate and blood pressure, cardiovascular failure	Muscle cramping/ sleep disturbances; depression; impaired memory; kidney, liver, and cardiovascular failure; anxiety	19.6 years (19.4 years in 2010) among people aged 12 to 49; youth rate not available	Included in hallucinogens data



Substance	Other Names 11,12,13	Negative Immediate Intoxication Effects ^{14,15}	Negative Health Effects ^{16,17}	Average Age of First Use in 2011 (vs. in 2010) Among People Aged 12 to 49; Current Rate Among Youths (12-17)18	Number of People (Aged 12 or Older) Who Used it in the Past Month in 2011 (vs. in 2010) ^{19,20}
Illicit Drugs					
Hallucinogens	Acid, boomers, doses, hits, LSD, microdot, peyote, shrooms, sugar cubes, tabs, trips	Dilated pupils, higher body temperature, increased heart rate and blood pressure, sweating, loss of appetite, sleeplessness, dry mouth, tremors	Disturbing flashbacks that may occur within a few days or more than a year after use	18.6 years (19.1 years in 2010) among people aged 12 to 49; rate of current use among youths is 0.9 percent	972,000 people (down from 1.2 million people in 2010) [includes ecstasy data]
Heroin	Big H, blacktar, brown sugar, dope, horse, junk, muc, skag, smack, white horse	Alternately wakeful and drowsy states, flushing of the skin, dry mouth, heavy extremities, slurred speech, constricted pupils, droopy eyelids, vomiting, constipation	Collapsed veins, infection of the heart lining and valves, abscesses, cellulitis, liver disease, pneumonia, clogged blood vessels, respiratory complications	22.1 years (21.3 years in 2010) among people aged 12 to 49; youth rate not available	281,000 people (similar to 239,000 people in 2010)
Marijuana	Blunt, dope, ganja, grass, herb, joint, bud, Mary Jane, pot, reefer, green, trees,smoke, skunk, weed	Distorted perception, trouble with thinking and problem solving, loss of motor coordination, increased heart rate	Respiratory infection, impaired memory, anxiety, exposure to cancer- causing compounds	17.5 years (18.4 years in 2010) among people aged 12 to 49; rate of current use among youths is 7.9 percent	18.1 million people (similar to 17.4 million people in 2010)
Metham- phetamine	Chalk, crank, crystal, ice, meth, speed, white cross	State of high agitation, insomnia, decreased appetite, irritability, aggression, anxiety, nervousness, convulsions	Paranoia, hallucination, repetitive behavior, delusions of parasites or insects crawling under the skin, psychosis, severe dental problems, heart attack	17.8 years (18.8 years in 2010) among people aged 12 to 49; youth rate not available	439,000 people (similar to 353,000 people in 2010)



Substance	Other Names 11,12,13	Negative Immediate Intoxication Effects ^{14,15}	Negative Health Effects ^{16,17}	Average Age of First Use in 2011 (vs. in 2010) Among People Aged 12 to 49; Current Rate Among Youths (12-17) ¹⁸	Number of People (Aged 12 or Older) Who Used it in the Past Month in 2011 (vs. in 2010) ^{19,20}
Prescription I	Drugs				
Pain Relievers	Vike (Vicodin®), oxy, O.C. (Oxycontin®), M (roxanol), school-boy (empirin with codeine), China white, dance fever (Actiq®)	Pain relief, euphoria, drowsiness, respiratory depression and arrest, nausea, confusion, constipation, sedation, unconsciousness, restlessness	Muscle and bone pain, drowsiness, seizure, coma, respiratory depression, decreased heart rate	21.8 years (21.0 years in 2010) among people aged 12 to 49; rate of current non-medical use of prescription pain relievers among youths is 2.3 percent	4.5 million people (down from 5.1 million people in 2010)
Psychothera- peutics	Prozac®, Zoloft®, Ritalin®	Increased heart rate, blood pressure, and metabolism; feelings of exhilaration and energy; increased mental alertness; rapid or irregular heartbeat; reduced appetite	Heart failure; weight loss; tremors and muscle twitching; fevers, convulsions, and headaches; irregular heartbeat and respirations; anxiety; restlessness; paranoia; hallucinations; delusions of parasites or insects crawling under the skin	22.4 years (22.3 years in 2010) among people aged 12 to 49; rate of current non-medical use of psychotherapeutic drugs among youths is 2.8 percent	6.1 million people (down from 7.0 million people in 2010)
Sedatives	Haldol®, Thorazine®, Navane®, Prolixin®, Mellaril®, Trilafon®	Slurred speech, shallow breathing, sluggishness, fatigue, disorientation and lack of coordination, dilated pupils, reduced anxiety, lowered inhibitions	Seizures; impaired memory, judgment, and coordination; irritability; paranoid and suicidal thoughts; sleep problems	22.0 years (23.5 years in 2010) among people aged 12 to 49; youth rate not available	231,000 people (down from 374,000 people in 2010)
Stimulants	Adderall®, Ritalin®, Concerta®	Increased blood pressure and heart rate, constricted blood vessels, increased breathing, cardiovascular failure, lethal seizures	Increased hostility or paranoia, dangerously high body temperatures, irregular heartbeat, cardiovascular failure, lethal seizures	22.2 years (21.2 years in 2010) among people aged 12 to 49; youth rate not available	979,000 people (similar to 1.1 million people in 2010)
Tranquilizers	Benzos (Mebaral®, Ativan®, Xanax®, Valium®, Nembutal®, Librium®)	Slurred speech, shallow breathing, sluggishness, fatigue, disorientation and lack of coordination, dilated pupils, reduced anxiety, lowered inhibitions	Seizures; impaired memory, judgment and coordination; irritability; paranoid and suicidal thoughts; sleep problems	24.6 years (24.6 years in 2010) among people aged 12 to 49; youth rate not available	1.8 million people (similar to 2.2 million people in 2010



Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

Sources:

¹Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.

²Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.

³Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.

4The National Institute of Mental Health. (n.d.). The Numbers Count: Mental Disorders in America. Retrieved September 14, 2012, from http://www.nimh.nih.gov/statistics/index.shtml.

⁵SAMHSA's Resource Center to Promote Acceptance, Dignity and Social Inclusion Associated with Mental Health (ADS Center). (n.d.). Facts About Common Mental Illnesses. Retrieved September 15, 2012, from http://stopstigma.samhsa.gov/publications/thefacts.aspx#panic.

Mental Health America. (n.d.). Personality Disorders. Retrieved September 15, 2012, from http://www.nmha.org/go/information/get-info/personality-disorders.

⁷Kessler, R.C., Berglund, P.A., Demler, O., Jin, R., Walters, E.E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication (NCS-R). Archives of General Psychiatry. Jun; 62(6): 593-602.

⁸Merikangas, K.R., He, J., Burstein, M., Swanson, S.A., Avenevoli, S., Cui, L., Benjet, C., Georgiades, K., Swendsen, J. (2010). Lifetime prevalence of mental disorders in U.S. adolescents: Results from the National Comorbidity Study-Adolescent Supplement (NCS-A). Journal of the American Academy of Child Adolescent Psychiatry. Oct; 49(10): 980-989.

⁹Regier, D.A., Narrow, W.E., Rae, D.S., Manderscheid, R.W., Locke, B.Z., Goodwin, F.K. (1993). The defacto mental and addictive disorders service system. Epidemiologic Catchment Area prospective 1-year prevalence rates of disorders and services. Archives of General Psychiatry. Feb; 50(2): 85–94.

¹⁰Kessler, R.C., Berglund, P.A., Demler, O., Jin, R., Walters, E.E. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication (NCS-R). Archives of General Psychiatry. Jun; 62(6): 593-602.

¹¹National Institute on Drug Abuse. (n.d.). NIDA: Commonly Abused Drugs Chart. U.S. Department of Health and Human Services. National Institutes of Health. Retrieved September 15, 2012, from http://www.nida.nih.gov/drugpages/drugsofabuse.html.

¹²The Partnership at DrugFree.org. (n.d.). Drug Guide. Retrieved September 15, 2012, from http://www.drugfree.org/drug-guide.

¹³National Institute on Drug Abuse. (n.d.). NIDA: Commonly Abused Prescription Drugs Chart. U.S. Department of Health and Human Services. National Institutes of Health. Retrieved February 3, 2012, from http://www.drugabuse.gov/drugs-abuse/commonly-abused-drugs/commonly-abused-prescription-drugs-chart.

¹⁴National Institute on Drug Abuse. (n.d.). NIDA: Commonly Abused Drugs Chart. U.S. Department of Health and Human Services. National Institutes of Health. Retrieved September 15, 2012, from http://www.nida.nih.gov/drugpages/drugsofabuse.html.

15The Partnership at DrugFree.org. (n.d.). Drug Guide. Retrieved September 15, 2012, from http://www.drugfree.org/drug-guide

¹⁶National Institute on Drug Abuse. (n.d.). NIDA: Commonly Abused Drugs Chart. U.S. Department of Health and Human Services. National Institutes of Health. Retrieved September 15, 2012, from http://www.nida.nih.gov/drugpages/drugsofabuse.html.

¹⁷The Partnership at DrugFree.org. (n.d.). *Drug Guide*. Retrieved September 15, 2012, from http://www.drugfree.org/drug-quide

¹⁸Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.

¹⁹Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012.

²⁰Substance Abuse and Mental Health Services Administration. (2011). Results from the 2010 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-41, HHS Publication No. (SMA) 11-4658. Rockville, MD: Substance Abuse and Mental Health Services Administration.

Treatment and Recovery

"Recovery is a gift that I get to open again and again, every day. I am living proof that recovery is possible."

Curtiss Kolodney
Recovery Support Services Consultant
Washington, DC

Strength

Healing

Triumph

Help

join the voices for recovery

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TREATMENT AND RECOVERY

Every September, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **National Recovery Month** (Recovery Month) to increase awareness and understanding of mental and substance use disorders. This initiative celebrates people in recovery, as well as those working in the behavioral health field. It promotes the message that behavioral health is essential to health, prevention works, treatment is effective, and people do recover.

The 2013 **Recovery Month** theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life. The theme also highlights that there are many treatment and recovery paths that can help a person achieve wellness, including professional care, self-help, and group support, allowing each person to embark on his or her own unique path.

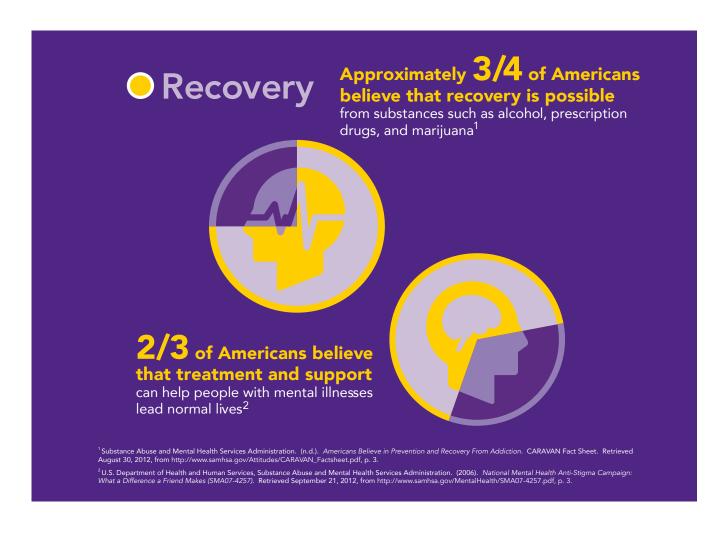
SAMHSA's Recovery Support Initiative (http://www.samhsa.gov/recovery) emphasizes the value of different forms of treatment and recovery. This initiative promotes individual-, program-, and system-level approaches and services that foster health and resilience; increase access to permanent housing, employment, education, and other necessary supports; and reduce discriminatory barriers to receiving help.¹ These approaches and services, each with unique characteristics and benefits, are explained below. They include resources to address problems with mental illnesses, substance use disorders, and co-occurring disorders (meaning having both mental and substance use disorders at the same time).

Treatment and Wellness Pathways...

A person with a mental and/or substance use disorder may find it difficult to take the first step toward finding help, but reaching out for support is worth it. Individuals may find that taking the first step is easier when talking to a trusted confidant such as a doctor, nurse, school or religious counselor, family member, or friend. People should not wait until they are in crisis to seek help. The "Overview" and "Young Adults" documents in this toolkit list the most common signs and symptoms of behavioral health conditions. Seeking treatment immediately after a noticeable change in functioning or thinking can make a difference.

Research confirms that most people who seek help feel better and manage or overcome their diseases. More than 80 percent of people treated for depression improve and nearly 90 percent of people treated for panic disorders see improvement.² Treatment can also help people with a substance use disorder – which includes problems with alcohol, illicit drugs, and/or prescription drugs. This is a medical problem that affects brain circuits that control reward and motivation, learning and memory, and behaviors.³ Because drug dependency alters brain functioning, treatment is not always simple. However, research shows that treatment can help people stop substance use, avoid relapse, and lead active lives engaged with their families, workplaces, and communities.⁴ Enrolling and maintaining health insurance coverage is critical to realizing the positive effects of treatment, and as multiple consensus reports from the Institute of Medicine confirm, health insurance coverage helps individuals maintain their health status.⁵





Services to treat and support individuals with mental and/or substance use disorders are available in a variety of settings including outpatient, inpatient, and residential settings. There are many ways in which treatment may be offered; the following are three of the common treatment settings.

- Outpatient treatment options are offered for people who visit clinical settings at regular intervals. These settings include private health care provider's offices, partial day hospitals or day treatment programs, and in-home providers.⁶ In these settings, individuals are able to receive services, while living elsewhere and continuing to participate in their regular daily routines, and such as work, childcare, or school.⁷
- **Inpatient treatment** includes constant supervision at hospitals or clinics specifically designed for behavioral health treatment. Individuals who are treated in these settings generally have disorders that pose a risk to themselves or others around them.⁸ Services offered in inpatient treatment often initiate the treatment process.
- **Residential treatment**⁹ exists for both short-term and long-term care. Short-term residential treatment, lasting between 3 to 6 weeks, is usually offered in hospital settings, after which patients are urged to participate in outpatient therapy and/or recovery support groups. Long-term residential treatment provides 24-hour care, often



in non-hospital facilities designed to model living settings, for 6 to 12 months. Residential treatment, including the best-known therapeutic communities (TCs) model, seeks to treat substance use disorders, helping residents examine damaging beliefs, self-perceptions, and destructive patterns of behavior and adopt new, more harmonious and constructive ways to interact with others. Many TCs offer employment training and other support services onsite.

Proven and effective treatment methods for mental and/or substance use disorders are behavioral treatments, medication treatment, and recovery support services. These services are provided in the variety of settings discussed previously.

Mental and Substance Use Disorder Treatment and Recovery Support Services...

Type of Service	Common Mental Disorder Service Description(s)	Common Substance Use Service Description(s)
Behavioral Treatments	Cognitive behavioral therapy (CBT) ¹⁰ focuses on the relationship between an individual's thoughts, feelings, and behaviors. A CBT-trained professional can help a person explore the links between his or her thoughts and the emotions that occur prior to disruptive behaviors. This allows someone to identify	CBT helps patients recognize, avoid, and cope with the situations in which they are likely to use substances. ¹⁵ CBT helps patients develop skills that can foster abstinence from substances, as well as assist with co-occurring problems. ¹⁶
	and change inappropriate or negative thought patterns and address the behaviors associated with his or her illness.	Family and couples treatment is based on the idea that engaging the patient's surrounding network can be helpful in fostering and changing a patient's behavior pattern related to substance
	Family-focused therapy (FFT) ¹¹ is centered on the idea that strong family relationships are vital to managing a mental illness. Family members attend FFT along with the individual with the mental illness.	use. These approaches can include family and individual therapy, skills training, and communication training. ¹⁷
	Therapists help identify and resolve conflicts among family members that may affect the person's mental health, and educate family members about their loved one's disorder. FFT also focuses on helping family members	Multidimensional family therapy addresses influences on a patient's drug abuse patterns and is designed to improve overall family functioning. ¹⁸
	cope with the stress of caring for loved ones with a mental illness.	Motivational interviewing capitalizes on the readiness of individuals to change their behavior and enter treatment.
	Interpersonal therapy (IBT) ¹² is based on the idea that improving communication patterns and the ways a person relates to others will effectively treat depression. IBT helps a person identify troubling emotions and triggers, and patterns in his or her interaction with others. The individual may also examine relationships in his or her past that may have been affected by the mental illness. This type of therapy guides people to change negative behaviors and express their appropriate emotions in a healthy way.	Contingency management (or motivational incentives) uses positive reinforcement to meet specific behavioral goals, specifically abstaining from using substances. ¹⁹ It is based on the principle that behavior followed by positive consequences is more likely to be repeated.



Common Mental Disorder	Common Substance Use
Service Description(s)	Service Description(s)
Dialectical behavioral therapy (DBT) ^{13,14} consists of a therapist offering assurance that a person's behavior and feelings are valid and understandable. At the same time, the therapist coaches the person to understand that it is his or her personal responsibility to change unhealthy or disruptive behavior. DBT also emphasizes a strong and equal relationship between the individual and his or her therapist. DBT can decrease the frequency and severity of negative behaviors, increase motivation to change, teach new coping skills, and provide a treatment environment that emphasizes a person's strengths.	
Medications can help people with mental disorders by treating their symptoms, thereby helping people to function and lead fulfilling lives. 22 Many different medication options exist for a range of mental disorders, including depression, bipolar disorder, anxiety disorders, schizophrenia, and attention-deficit hyperactive disorder (ADHD).	Certain medications can be used during the necessary initial treatment phase of detoxification, a process when the body clears itself of drugs, but is often accompanied by unpleasant, serious side effects. Medications help to manage these withdrawal symptoms. It is important to note that detoxification is one step in the treatment process, and those who do not receive additional treatment after this are at higher risk of relapse than those who receive ongoing care. Medication-assisted treatment is a viable longer-term option for many individuals after detoxification. Medications are currently available to treat addiction to opioids and alcohol. Treatments for opioid addiction (such as methadone, buprenorphine, and naltrexone) suppress withdrawal symptoms, relieve cravings, disengage someone from drug-seeking behavior, and help people become more receptive to behavioral treatments. Medications approved to treat alcohol addiction (naltrexone, acamprosate, and disulfiram) can reduce relapse by altering the rewarding effects of drinking, minimizing the symptoms associated with withdrawal, or producing unpleasant reactions when a person consumes alcohol. When considering treatment options, keep in mind that research indicates that treating substance use disorders with a combination of medication and behavioral therapies is most successful. Termination of medication and behavioral therapies is most successful.
	Dialectical behavioral therapy (DBT) ^{13,14} consists of a therapist offering assurance that a person's behavior and feelings are valid and understandable. At the same time, the therapist coaches the person to understand that it is his or her personal responsibility to change unhealthy or disruptive behavior. DBT also emphasizes a strong and equal relationship between the individual and his or her therapist. DBT can decrease the frequency and severity of negative behaviors, increase motivation to change, teach new coping skills, and provide a treatment environment that emphasizes a person's strengths. Medications can help people with mental disorders by treating their symptoms, thereby helping people to function and lead fulfilling lives. ²² Many different medication options exist for a range of mental disorders, including depression, bipolar disorder, anxiety disorders, schizophrenia, and attention-deficit hyperactive



Type of Service	Common Mental Disorder Service Description(s)	Common Substance Use Service Description(s)
Recovery Support Services (RSS) RSS are nonclinical services that assist individuals, as well as their families, in recovery from mental and substance use disorders. The goal is to facilitate long-term recovery and wellness, contributing to an improved quality of life. RSS can be led by behavioral health professionals or someone who has personal experience. These services include employment services and job training, relapse prevention methods, housing assistance and services, child care, transportation services, family/marriage education, peer-to-peer services, mentoring, and coaching, self-help and support groups, life skills, spiritual and faith-based support, child development support services, education, and substance abuse education. ²⁸	Through RSS, guidance and support are often provided by another person who has learned how to manage their mental illness. People may find comfort in support groups because they can discuss shared experiences with others and realize that they are not alone in their recovery. Group members share frustrations and successes, referrals for treatment, and ways to help continue on a recovery path. Defor family and friends of those with a mental illness. More information about these types of groups, including local groups, can be found at NAMI Connection, American Self-Help Clearinghouse, and the National Mental Health Consumers' Self-Help Clearinghouse.	RSS are often provided by peers, faith or community leaders, or recovery professionals. Peers can be individuals who have firsthand experience in receiving treatment and sustaining recovery. Faith-based services provide care within the context of a religious framework of beliefs and rituals. Services offered by recovery support professionals employ the expertise of those who are trained with specific credentials to offer care within treatment agencies or other systems. These providers may be in recovery themselves.

Co-occurring Disorder Treatment and Recovery Pathways...

When a person experiences a simultaneous mental illness and substance use disorder, both conditions must be treated at the same time – merely focusing on one condition will not ensure that the other will go away.³¹ SAMHSA advocates for integrated treatment, which means that someone should receive combined treatment for mental illness and substance use disorders from the same practitioner or treatment team.³² Integrated treatment relies on cross-trained practitioners, catering to the person's stage in the treatment process, motivational interventions, and a variety of service formats to achieve positive outcomes.³³

The services described in the chart above are also used in the treatment of co-occurring disorders. The use of proper medication is an essential co-occurring disorder treatment option, as it helps patients to stabilize and control their symptoms, subsequently increasing their receptivity to treatment.³⁴ Various psychotherapy techniques have also shown promise for the treatment of co-occurring disorders. These options include motivational interviewing, contingency management, and CBT.³⁵ Continuing care options such as mutual self-help groups, recovery maintenance groups, continued individual counseling, and psychiatric services play a significant role helping patients with co-occurring disorders to sustain recovery.³⁶



Alternative Pathways to Wellness...

Wellness encompasses more than simply managing a mental illness or recovering from a co-occurring or substance use disorder. Other aspects of a person's health are just as important to overall wellness. In fact, a study by the Centers for Disease Control and Prevention found that people who practiced four healthy behaviors – not smoking, eating healthy, getting enough exercise, and limiting alcohol use – were 63 percent less likely to die within the 18-year study period than those who kept none of those practices.³⁷ People seeking treatment or in recovery from a behavioral health condition can consider the options below to enhance their recovery and encourage individual wellness. These techniques focus on interactions between the mind, body, and behavior to affect physical functioning and promote health:

- **Meditation:** Uses specific postures and focused attention to increase calmness and relaxation, improve psychological balance, cope with illness, or enhance overall health and well-being.³⁸
- **Yoga:** Combines physical postures, breathing techniques, meditation, and relaxation to help people maintain their health, improve physical fitness, and relieve stress. Yoga has also been used to address health conditions such as back pain, neck pain, arthritis, and anxiety. Yoga of Recovery (http://yogaofrecovery.com) is an organization that uses a 12-step format to help people who are recovering from addictive behaviors.³⁹
- **Acupuncture:** Involves stimulating specific points on the body with thin, solid, metallic needles that are manipulated by the hands or by electrical stimulation. It is often used to relieve pain or for other therapeutic purposes.⁴⁰

People who have experienced a mental and/or substance use disorder can also look online and to new technologies to help continue on their recovery journey. Online recovery support groups, which include In The Rooms (http://www.intherooms.com) and Renew Everyday (http://www.reneweveryday.com), allow users to share their stories and advice for sustaining recovery with others in the recovery community. People can also find support on Facebook and Twitter – refer to *Recovery Month's* Facebook (http://www.facebook.com/RecoveryMonth) and Twitter (https://twitter.com/recoverymonth) accounts to locate others who are currently active in the online recovery community.

Mobile applications are also available to supplement people's recovery. T2 Mood Tracker (http://t2health.org/apps/t2-mood-tracker) is a tool that allows users to self-monitor, track, and reference their emotional experiences over a period of days, weeks, and months. The tool can be useful in self-help as well as when the person is interacting with a therapist or other health care professional. Various mobile applications are available to help people track sober time, manage triggers and emotions, find and share meetings, contact sponsors, and receive daily information. Consult the Addiction Recovery Guide's Mobile App Listing (http://www.addictionrecoveryguide.org/resources/mobile_apps) for a full list of applications.

Many options are available to help people seek treatment and sustain recovery. Whatever path a person chooses, it is important that each individual finds a combination of treatment and recovery services that best meets the person's own needs and goals.



Additional Resources...

A variety of resources provide additional information on **Recovery Month** and mental and/or substance use disorders, as well as prevention, treatment, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (http://www.samhsa.gov):** Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.
- **SAMHSA's "Co-Occurring Disorders" Website (http://www.samhsa.gov/co-occurring):** Contains information on co-occurring disorders and treatment options.
- SAMHSA's Wellness Initiative (http://www.promoteacceptance.samhsa.gov/10by10/default.aspx):

 Promotes the importance of addressing all parts of a person's life in hopes of increasing life expectancy for people with behavioral health problems.
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- Al-Anon/Alateen Family Groups (http://www.al-anon.alateen.org): Provides support groups for families and friends of people with alcohol problems.
- Alcoholics Anonymous (http://www.aa.org) and Narcotics Anonymous (http://www.na.org): Contains an
 array of resources for individuals suffering from alcohol or drug dependence, respectively, and allows them to
 find and join a local chapter.
- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral health care executives, CEOs, and directors, including health care insurance enrollment training information.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment and recovery support needs of the public.
- Healthcare.gov (http://www.healthcare.gov/index.html): Contains information on finding health insurance options, help using insurance, information on the Affordable Care Act, help comparing providers, and information on prevention and wellness resources.
- Mental Health America (http://www.mentalhealthamerica.net): Offers resources about the realities of mental illness.



- Nar-Anon (http://www.nar-anon.org): Offers a community for family members to share experiences related to substance use disorders.
- Psychology Today's Therapy Directory (http://therapists.psychologytoday.com/rms): Allows users to
 locate a therapist, psychologist, or counselor who specializes in mental illness by city or zip code throughout
 the United States.
- **RecoverForever.com (http://recoverforever.com):** Offers live online support and contains an abundance of resources on alcohol and drug treatment services that are searchable by state.
- Racing for Recovery (http://www.racingforrecovery.com): Helps people sustain recovery and improve their quality of life by promoting a healthy lifestyle, fitness, and sobriety.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.
- **Treatment 101: Recovery Today:** Part of SAMHSA's *Road to Recovery* Television and Radio series that examines many aspects of treatment and recovery.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



Sources:

Substance Abuse and Mental Health Services Administration, Leading Change: A Plan for SAMHSA's Roles and Actions 2011-2014. HHS Publication No. (SMA) 11-4629. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2011, p. 49.

²Mental Health America. (n.d.). Get Professional Help If You Need It. Retrieved September 20, 2012, from http://www.liveyourlifewell.org/go/live-your-life-well/help.

³National Institute on Drug Abuse. (2011). Seeking Drug Abuse Treatment: Know What to Ask. Retrieved September 20, 2012, from http://www.drugabuse.gov/sites/default/files/treatmentbrochure_web.pdf, p. 1.

⁴National Institute on Drug Abuse. (2009). DrugFacts: Treatment Approaches for Drug Addiction. Retrieved September 20, 2012, from http://www.drugabuse.gov/publications/drugfacts/treatment-approaches-drug-addiction.

Institute of Medicine. (2009). America's Uninsured Crisis Consequences for Health and Health Care. Washington, D.C. The National Academies Press. Retrieved on December 10, 2012, from http://iom.edu/Reports/2009/Americas-Uninsured-Crisis-Consequences-for-Health-and-Health-Care.aspx.

Substance Abuse and Mental Health Services Administration. (2008). Mental Health Settings; New Data. Retrieved October 9, 2012, from http://www.samhsa.gov/samhsanewsletter/Volume_16_Number_6/MentalHealthSettings.aspx.

²Substance Abuse and Mental Health Services Administration (SAMHSA). (2004). What Is Substance Abuse Treatment? A Booklet for Families. (DHHS Publication No.(SMA) 04-3955). Rockville, MD: Substance Abuse and Mental Health Services Administration. Retrieved September 20, 2012, from http://kap.samhsa.gov/products/brochures/pdfs/WhatlsTx.pdf, p. 9.

Congressional Research Service. (2009). The U.S. Mental Health Delivery System Infrastructure: A Primer. Retrieved October 10, 2012, from http://www.fas.org/sgp/crs/misc/R40536.pdf, p. 6.

National Institute on Drug Abuse. (2009). Principles of Drug Addiction Treatment: A Research-Based Guide. Retrieved September 26, 2012, from http://www.drugabuse.gov/publications/principles-drug-addiction-treatment/drug-addiction-treatment-in-united-states/general-categories-treatment-progr.

10 Mental Health America. (2012). Psychosocial Treatments Fact Sheet. Retrieved September 20, 2012, from http://www.nami.org/factsheets/psychosocial_factsheet.pdf.

11 National Institute of Mental Health. (n.d.). Psychotherapies. Retrieved September 20, 2012, from http://www.nimh.nih.gov/health/topics/psychotherapies/index.shtml.

¹²National Institute of Mental Health. (n.d.). Psychotherapies. Retrieved September 20, 2012, from http://www.nimh.nih.gov/health/topics/psychotherapies/index.shtml.

¹³Mental Health America. (2012). Treatment and Services. Retrieved September 20, 2012, from http://www.nami.org/Template.cfm?Section=About_Treatments_and_Supports&Template=/. ContentManagement/ContentDisplay.cfm&ContentID=10510.

14 National Institute of Mental Health. (n.d.). Psychotherapies. Retrieved September 20, 2012, from http://www.nimh.nih.gov/health/topics/psychotherapies/index.shtml

¹⁵National Institute on Drug Abuse. (2009). DrugFacts: Treatment Approaches for Drug Addiction. Retrieved October 9, 2012, from http://www.drugabuse.gov/publications/drugfacts/treatment-approaches-drug-addiction.

¹⁶Carroll, K. and Onken, L. (2005). Behavioral Therapies for Drug Abuse. *American Journal of Psychiatry*, 162:8. Retrieved October 9, 2012, from http://ajp.psychiatryonline.org/data/Journals/AJP/4015/1452.pdf, p. 1454.

¹⁷Carroll, K. and Onken, L. (2005). Behavioral Therapies for Drug Abuse. American Journal of Psychiatry, 162:8. Retrieved October 9, 2012, from http://ajp.psychiatryonline.org/data/Journals/AJP/4015/1452.pdf, p. 1455.

18National Institute on Drug Abuse. (2009). DrugFacts: Treatment Approaches for Drug Addiction. Retrieved October 9, 2012, from http://www.drugabuse.gov/publications/drugfacts/treatment-approaches-drug-addiction.

¹⁹National Institute on Drug Abuse. (2009). *DrugFacts: Treatment Approaches for Drug Addiction*. Retrieved October 9, 2012, from http://www.drugabuse.gov/publications/drugfacts/treatment-approaches-drug-addiction.

Mental Health America. (n.d.). Get Professional Help If You Need It. Retrieved September 20, 2012. from http://www.livevourlifewell.org/go/live-your-life-well/help.

²¹National Institute of Mental Health. (2010). Mental Health Medications. Retrieved September 20, 2012, from http://www.nimh.nih.gov/health/publications/mental-health-medications/nimh-mental-health-medications.pdf, p.1.

²²National Institute of Mental Health. (2010). *Mental Health Medications*. Retrieved September 20, 2012, from http://www.nimh.nih.gov/health/publications/mental-health-medications.pdf, p.1.

²³National Institute on Drug Abuse. (2009). Principles of Drug Addiction Treatment: A Research-Based Guide. Retrieved September 26, 2012, from http://www.drugabuse.gov/publications/principles-drug-addiction-treatment-in-united-states/general-categories-treatment-progr.

²⁴National Institute on Drug Abuse. (2009). DrugFacts: Treatment Approaches for Drug Addiction. Retrieved September 20, 2012, from http://www.drugabuse.gov/publications/drugfacts/treatment-approaches-drug-addiction.

²⁶National Institute on Drug Abuse. (2009). DrugFacts: Treatment Approaches for Drug Addiction. Retrieved September 20, 2012, from http://www.drugabuse.gov/publications/drugfacts/treatment-approaches-drug-addiction.

²⁶National Institute on Drug Abuse. (2009). DrugFacts: Treatment Approaches for Drug Addiction. Retrieved September 20, 2012, from http://www.drugabuse.gov/publications/drugfacts/treatment-approaches-drug-addiction.

²⁷Substance Abuse and Mental Health Services Administration. (n.d.). About Medication-Assisted Treatment. Retrieved September 25, 2012, from http://dpt.samhsa.gov/patients/mat.aspx.

²⁸Kaplan, L., The Role of Recovery Support Services in Recovery-Oriented Systems of Care. DHHS Publication No. (SMA) 08-4315. Rockville, MD: Center for Substance Abuse Treatment,



Substance Abuse and Mental Health Services Administration, 2008. Retrieved September 26, 2012, from http://www.facesandvoicesofrecovery.org/pdf/SAMHSARecovery.WhitePaper.pdf, p. 7.

²⁹Mental Health America. (2012). *Treatment and Services*. Retrieved September 20, 2012, from http://www.nami.org/Template.cfm?Section=About_Treatments_and_Supports&Template=/ContentManagement/ContentDisplay.cfm&ContentID=143974.

³⁰Mental Health America. (2012). Treatment and Services. Retrieved September 20, 2012, from http://www.nami.org/Template.cfm?Section=About_Treatments_and_Supports&Template=/ContentManagement/ContentDisplay.cfm&ContentID=10510.

^{3†}National Alliance on Mental Illness. (n.d.). *Dual Diagnosis and Integrated Treatment of Mental Illness and Substance Abuse Disorder.* Retrieved September 26, 2012, from http://www.nami.org/Template.cfm?Section=By_Illness&Template=/TaggedPage/Tagged

³²Substance Abuse and Mental Health Services Administration. (2009). Integrated Treatment for Co-Occurring Disorders. Retrieved September 26, 2012, from http://store.samhsa.gov/shin/content//SMA08-4367/Brochure-ITC.pdf.

33Substance Abuse and Mental Health Services Administration. (2009). Integrated Treatment for Co-Occurring Disorders. Retrieved September 26, 2012, from http://store.samhsa.gov/shin/content//SMA08-4367/Brochure-ITC.pdf.

³⁴Center for Substance Abuse Treatment. Substance Abuse Treatment for Persons With Co-Occurring Disorders. Treatment Improvement Protocol (TIP) Series 42. DHHS Publication No. (SMA) 05-3992. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2005. Retrieved October 10, 2012, from http://www.ncbi.nlm.nih.gov/books/NBK64197/pdf/TOC.pdf, p. xx.

³⁵Center for Substance Abuse Treatment. Substance Abuse Treatment for Persons With Co-Occurring Disorders. Treatment Improvement Protocol (TIP) Series 42. DHHS Publication No. (SMA) 05-3992. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2005. Retrieved October 10, 2012, from http://www.ncbi.nlm.nih.gov/books/NBK64197/pdf/TOC.pdf, p. xxi.

³⁶Center for Substance Abuse Treatment. Substance Abuse Treatment for Persons With Co-Occurring Disorders. Treatment Improvement Protocol (TIP) Series 42. DHHS Publication No. (SMA) 05-3992. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2005. Retrieved October 10, 2012, from http://www.ncbi.nlm.nih.gov/books/NBK64197/pdf/TOC.pdf, p. xxi.

³⁷Ford E.S., et al. (2011). Low-risk lifestyle behaviors and all-cause mortality. Findings from the National Health and Nutrition Examination Survey III Mortality Study. American Journal of Public Health, 101(10):1922-9; DOI:10.2105/AJPH.2011.300167. Retrieved September 26, 2012, from http://www.medpagetoday.com/PublicHealthPolicy/PublicHealth/28126.

³⁸National Center for Complementary and Alternative Medicine. (2011). What Is Complementary and Alternative Medicine? Retrieved September 26, 2012, from http://nccam.nih.gov/health/whatiscam#types.

³⁹National Center for Complementary and Alternative Medicine. (2012). Yoga for Health. Retrieved September 26, 2012, from http://nccam.nih.gov/health/yoga/introduction.htm.

⁴⁰National Center for Complementary and Alternative Medicine. (2011). Acupuncture: An Introduction. Retrieved September 26, 2012, from August 30, 2012 from http://nccam.nih.gov/health/acupuncture/introduction.htm.

Issue Recovery Month Proclamations

"I hope that my will to live and stay mentally well inspires people to change their lives for the better."

Kevin Hines
Speaker and Author
Walnut Creek, CA

Engagement Accomplishments Respect

Triumph

join the voices for recovery

on pathways to wellness



ISSUE RECOVERY MONTH PROCLAMATIONS

A proclamation is an official announcement that publicly recognizes an initiative such as **National Recovery Month** (**Recovery Month**). Proclamations are typically signed and issued by federal officials, governors, state legislators, or other government officials at the local level. Issue a proclamation designating September as **Recovery Month** on behalf of a state, territory, city, or county to raise awareness for **Recovery Month**, bring attention to mental and/ or substance use disorders, and spread the message that behavioral health is essential to overall health, prevention works, treatment is effective, and people recover.

In 2012, 106 proclamations were signed to support **Recovery Month,** including one issued by President Barack Obama. For the past 12 years, the Executive Office of the President of the United States has supported the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), by working to raise public awareness and support for those with behavioral health conditions, as well as their communities and families. The Presidential Proclamation recognizes the importance of prevention, treatment, and recovery across the country. Equally as important are the hundreds of proclamations issued at the state, territory, and local levels each year, which is where your support is needed.

Create a proclamation that highlights this year's **Recovery Month** theme to differentiate your proclamation from previous years. Refer to the information below for other tips to help draft and promote a proclamation.

Contact Public Officials...

Before you write a proclamation to designate September as **Recovery Month** in your area, research local officials to gauge their interests and beliefs about prevention, treatment, and recovery support services. You will want to engage someone who is passionate about this issue, if possible. Remember that many public officials can issue a proclamation, including:

- Governors
- Mayors
- City council members
- State legislators
- County managers
- Tribal nation leaders

Since some legislatures are not in session during the summer months, contact public officials at least three months in advance of *Recovery Month*. Write a letter or send an email to initiate correspondence with an official's communications office, and follow up with a phone call. During the initial conversation, explain the *Recovery Month* observance, detail scheduled local activities, and discuss the importance of their support for this annual event. If the official's office is unfamiliar with the proclamation process, explain that it's a simple way for the government to recognize the importance of prevention of, treatment for, and recovery from mental and/or substance use disorders – and that it can encourage those in need to seek help.



Once the office confirms that the official might support **Recovery Month** and issue a proclamation, it's time to start writing.

Decide on a Style...

There are two styles of proclamation writing: traditional and modern. While these two styles differ in format, they can both generate awareness of **Recovery Month.**

- **Traditional proclamations** begin with a series of statements starting with the words "whereas," which detail the current state of affairs and suggest the reasoning behind the proclamation. Each clause notes the problems or issues being addressed and is followed by a concluding phrase beginning with "therefore," which specifically requests the support or action needed.
- Modern proclamations are written in a letter format, for instance, the 2012 Presidential Proclamation
 (http://www.recoverymonth.gov/~/media/Images/Proclamations/2010/PresidentBarackObama.ashx).
 They highlight the same points as a traditional proclamation, but are written as statements.

Samples of both formats are included at the end of this document. Examples of signed and issued proclamations can be viewed on the **Recovery Month** website at **http://www.recoverymonth.gov** under the "Proclamations" section.

Develop a Proclamation...

Once you are familiar with the different proclamation styles, use the following checklist when drafting a proclamation and working to gain public support for **Recovery Month.**

- Determine the official's preferred writing style (traditional or modern).
- Offer to draft the proclamation.
- Refer to the examples at the end of this document to help draft the proclamation.
- Insert local information or statistics that will resonate with community members (see examples in the "Fast Facts" document in this toolkit).
- Submit the proclamation to the official's office early and allow time for the official to review and sign the proclamation.
- Follow up frequently to check the status of the proclamation.
- Once it has been signed, display copies of the proclamation in public places.
- Post the proclamation on the **Recovery Month** website, Facebook page (http://www.facebook.com/ RecoveryMonth), and Twitter account (http://twitter.com/recoverymonth).



Personalize:

You can personalize your proclamation for your community and include important messages about recovery. Consider including or consulting the following resources about treatment and recovery services:

- Single-State Agency (SSA) Directory
- SAMHSA's National Survey on Drug Use and Health (http://www.samhsa.gov/data/NSDUH.aspx)
- SAMHSA's Recovery Statement (http://blog.samhsa.gov/2012/03/23/defintion-of-recovery-updated/)
- SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS) (http://wwwdasis.samhsa.gov/dasis2/nssats.htm)
- SAMHSA's Drug Abuse Warning Network (http://www.samhsa.gov/data/DAWN.aspx)
- SAMHSA's Treatment Episode Data Set (http://www.oas.samhsa.gov/DASIS.htm)

Publicize...

Publicize the proclamation to bring further attention to **Recovery Month** and generate momentum for the national observance in your community. Visit local businesses, health clubs, libraries, hotel lobbies, schools, college campuses, treatment and recovery centers, community mental health centers, and/or government buildings to see if they allow you to display copies of proclamations. If permitted, display a **Recovery Month** poster to garner additional attention and increase interest.

Arrange a press conference or "town-hall" meeting and have local officials sign or present the proclamation there as an additional publicity option. The event can be accompanied by a roundtable discussion on issues related to mental and/or substance use disorders. Ideas for panelists include treatment and service providers, families affected by mental or substance use disorders, young adults affected by these disorders, and other individuals already in recovery. For information on how to plan a **Recovery Month** event such as this, refer to the "Promote **Recovery Month** with Events" document in this toolkit.

Lastly, arrange for a proclamation to be featured in a local publication to increase awareness. Distribute electronic copies of the document to the "local" or "metro" desks of local newspapers, along with a press release to announce the signing of the **Recovery Month** proclamation. For tips on how to write an effective press release, refer to the "Press Materials for Your **Recovery Month** Event" document in this toolkit.



Share...

Post a copy of the proclamation on the **Recovery Month** website (http://www.recoverymonth.gov) and send it electronically to recoverymonth@samhsa.hhs.gov or in hard copy to:

Substance Abuse and Mental Health Services Administration ATTN: Consumer Affairs/**Recovery Month** Center for Substance Abuse Treatment 1 Choke Cherry Road, Seventh Floor Rockville, MD 20857

Consult Resources...

For more information on **Recovery Month** and services available to people in need, please refer to the following resources:

- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.
- The Recovery Month website (http://www.recoverymonth.gov): Contains all the materials from this toolkit and a wide variety of relevant resources.
- **Technical Assistance Centers:** Maximizes self-determination and recovery and assists people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
 - National Consumer Supporter Technical Assistance Center at Mental Health America (http://www.ncstac.org);
 - National Empowerment Center (http://www.power2u.org);
 - National Mental Health Consumers' Self-Help Clearinghouse (http://www.mhselfhelp.org);
 - The Family Café (http://familycafe.net); and
 - The STAR Center (http://www.consumerstar.org/index.html).
- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral health care executives, CEOs, and directors, including health care insurance enrollment training information.



- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment, and recovery support needs of the public.
- **Healthcare.gov (http://www.healthcare.gov/index.html):** Contains information on finding health insurance options, help using insurance, information on the Affordable Care Act, help comparing providers, and information on prevention and wellness resources.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



Sample Proclamation 1: Traditional Format

WHEREAS, behavioral health is an essential part of health and one's overall wellness; and

WHEREAS, prevention of mental and/or substance use disorders works, treatment is effective, and people recover in our area and around the nation; and

WHEREAS, preventing and overcoming mental and/or substance use disorders is essential to achieving healthy lifestyles, both physically and emotionally; and

WHEREAS, we must encourage relatives and friends of people with mental and/or substance use disorders to implement preventive measures, recognize the signs of a problem, and guide those in need to appropriate treatment and recovery support services; and

WHEREAS, in 2011, 3.8 million people received specialty treatment for a substance use disorder and more than 31.6 million adults aged 18 or older received services for mental disorders, according to the 2011 National Survey on Drug Use and Health. Given the serious nature of this public health problem, we must continue to reach the millions more who need help; and

WHEREAS, on October 1, 2013 as a result of the Affordable Care Act, more than 11 million uninsured individuals with behavioral health needs will become eligible for affordable insurance coverage for their treatment needs, according to the 2011 National Survey on Drug Use and Health. We must ensure that all of these individuals are successfully enrolled into coverage; and

WHEREAS, to help more people achieve and sustain long-term recovery, the U.S. Department of Health and Human Services (HHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), the White House Office of National Drug Control Policy (ONDCP), and [Name of State, City, County or Treatment Organization] invite all residents of [State/City/Town] to participate in National Recovery Month (Recovery Month); and

NOW, THEREFORE, I [Name and Title of Your Elected Official], by virtue of the authority vested in me by the laws of [City, State, or Locality], do hereby proclaim the month of September 2013 as

National Recovery Month

In [City or State] and call upon the people of [City or State] to observe this month with appropriate programs, activities, and ceremonies to support this year's *Recovery Month*.

In Witness Whereof, I have hereunto set my hand this **[Day of Month]** day of **[Month],** in the year of our Lord two thousand thirteen, and of the Independence of the United States of America the two-hundred and thirty-eighth.

Signature

[Insert City/State or Other Official Seal]



Sample Proclamation 2: Modern Format

Mental and substance use disorders affect all communities nationwide, but with commitment and support, people with these disorders can achieve healthy lifestyles and lead rewarding lives in recovery. In 2011, 3.8 million people aged 12 or older received specialty treatment for an illicit drug or alcohol use problem in the past year, and more than 31.6 million adults aged 18 or older received mental health services in the past year. By seeking help, people who experience mental and/or substance use disorders can embark on a new path toward improved health and overall wellness.

The focus of **National Recovery Month** (**Recovery Month**) this September is to celebrate their journey. **Recovery Month** spreads the message that behavioral health is an essential part of health and one's overall wellness, and that prevention works, treatment is effective, and people recover.

This is a message we need to spread far and wide. The impact of mental and substance use disorders is apparent in our local community, and an estimated XX [Thousand/Million] people in [City or State] are affected by these conditions. According to the 2011 National Survey on Drug Use and Health, in 2011, 21.6 million people aged 12 or older nationwide needed treatment for an illicit drug or alcohol use problem (8.4 percent of people aged 12 or older). Of these, 2.3 million (0.9 percent of people aged 12 or older and 10.8 percent of those who needed treatment) received treatment at a specialty facility. Also in 2011, out of the 45.6 million Americans aged 18 or older who had any mental illness in the past year, only 31.6 million received mental health services in the past year. Through **Recovery Month**, people become more aware and able to recognize the signs of mental and/or substance use disorders, which can lead more people into needed treatment. Managing the effects of these conditions can help people achieve healthy lifestyles, both physically and emotionally.

For 24 years, **Recovery Month** has worked to improve the lives of those affected by mental and/or substance use disorders by raising awareness of these diseases and educating communities about the prevention, treatment, and recovery resources that are available. For the above reasons, I am asking the citizens of **[City or State]** to join me in celebrating this September as **National Recovery Month**.

I, [Name and Title of Elected Official], do hereby proclaim the month of September 2013 as

National Recovery Month

In [City or State] and call upon our community to observe this month with compelling programs and events that support this year's observance.

	Signature

[Insert City/State or Other Official Seal]

Press Materials for your **Recovery Month** Event

"I am my own, proud woman in recovery for 21 years. I care for myself and do my best to maintain my integrity with myself and others."

Beth

Blogger, *Be Here Today* Irving, TX

Health Empowerment

Education

Cupport

Community

join the voices for recovery

COETIES

on pathways to wellness



PRESS MATERIALS FOR YOUR RECOVERY MONTH EVENT

Each September, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **National Recovery Month** (**Recovery Month**), which celebrates people in recovery, lauds the contributions of treatment and service providers, and promotes the message that recovery in all its forms is possible.

To generate positive publicity for **Recovery Month** activities, you can create and distribute press materials to spread the recovery message. These materials can garner media coverage and highlight the fact that behavioral health is essential to health, prevention works, treatment is effective, and people recover from mental and/or substance use disorders.

Use this document to guide the development and distribution of publicity materials to promote **Recovery Month** events this September and throughout the year.

Choose a Format...

There are several types of materials you or your organization can share with the media to publicize your **Recovery**Month event, highlighting messages that will resonate with your intended audiences and the media. The following tools will build awareness for a **Recovery Month** event. Examples of most of these tools can be found at the end of this document and can be modified to distribute to media outlets. When drafting these materials, remember to use organization-specific letterhead or the **Recovery Month** letterhead found at http://www.recoverymonth.gov.

- **Media advisories,** or media alerts, are brief one page documents that alert the media of an upcoming event and provide essential information about the event's date, time, and location. They are brief and entice reporters to attend the event to learn more. Advisories should be sent to the calendar editor of a local newspaper and also the health care reporter or editor that covers local news or events. They should also include the organization's contact information, as well as information on scheduling interviews and taking photos.
- **Press releases,** or news releases, are one- or two-page announcements sent to the media so they will cover a story or event. A release is similar to a condensed news story, which sometimes is repurposed as a stand-alone article in a newspaper. Refer to the "Work with the Media" document in this toolkit for factors that reporters use to determine if a story is newsworthy. Press releases should:
 - Be approximately 500 words, formatted in short paragraphs;
 - o Contain the most important information at the top, followed by supporting details later in the article; and
 - o Include a quote from an event's spokesperson or key figure.
- Backgrounders are succinct, supplementary documents that often accompany a media advisory or news release. A backgrounder may also be distributed at *Recovery Month* events, or sent to reporters separately. They can be written in paragraph form or have bulleted information. Create a backgrounder, such as the one at the end of this document, that highlights SAMHSA and *Recovery Month;* your organization; the specific event; recent behavioral health data; relevant prevention, treatment, and recovery support services; and local individuals in recovery.



- **Op-eds,** or opposite editorials, provide an opinion on a specific topic or event, and are published opposite a publication's editorial page. An op-ed's purpose is to influence public opinion by taking a strong position and creating a dialogue about issues affecting a community, such as mental and/or substance use disorders. Refer to the "Share Your Voice Through Op-Eds and Online Articles" document for information on how to draft and submit an op-ed.
- Letters to the editor are brief letters written to express an individual's or organization's point of view on a particular, yet timely, subject that was recently covered in the news. Letters should be written as a response to other news stories and should highlight a timely issue, such as how the rate of mental and/or substance use disorders in a local community factors into other stories in the news. Letters to the editor tend to be published in newspapers and news magazines.
- **Public service announcements** (PSAs) are non-paid informational commercials, distributed to local radio or television outlets. PSAs create awareness of **Recovery Month** in communities and help inform audiences about the realities of mental and/or substance use disorders. Refer to the "**Recovery Month** Public Service Announcements" document in this toolkit for more information.

Draft...

When drafting press materials for a **Recovery Month** event, explain why behavioral health issues are important to address and why your event is beneficial to the community. Remember to share these messages with all members of your event-planning committee, so that anyone can offer a relevant quote if asked by the media. It may be helpful to review the "Work with the Media" document for more advice on interacting with reporters.

When developing press materials, keep in mind the following tips:

- Avoid using slang terms that may offend people in recovery or technical jargon that the general public may not understand; and
- Double-check the names, titles, and contact information in press materials, and verify that all statistics and spellings are correct.

Personalize:

Use the following resources to customize your press materials with local data when possible:

- Single-State Agency Directory (SSA)
- SAMHSA's National Survey on Drug Use and Health (https://nsduhweb.rti.org)
- SAMHSA's National Survey on Substance Abuse Treatment Services (N-SSATS) (http://wwwdasis.samhsa.gov/dasis2/nssats.htm)
- SAMHSA's Treatment Episode Data Set (http://oas.samhsa.gov/dasis.htm#teds2)
- SAMHSA Regional Offices (http://www.samhsa.gov/about/regions/index.aspx)



Disseminate...

Before distributing the media materials you have developed, confirm that your materials adequately highlight the importance of **Recovery Month**, have a specific "call to action," and provide community-specific information.

Press materials are most commonly distributed electronically. To ensure a reporter views the press materials, copy and paste the information into the body of an email. Make sure the headline and first paragraph are readable to prevent unnecessary scrolling. Also, personalize each email so the reporter knows it is not a mass message.

To learn where to send materials and how to build a comprehensive media list, refer to the "Work with the Media" document in this toolkit.

Coordinate Timing...

Media advisories are typically sent to reporters about a week in advance of an event. Remember, these alerts serve as an invitation or "save-the-date" for the event. On the other hand, press releases are distributed either immediately before or at the event, or can be given to reporters under an "embargo" agreement until the event or announcement becomes official.

To distribute materials to a large number of recipients, use an online distribution service, such as:

- 24/7 Press Release (http://www.24-7pressrelease.com)
- Business Wire (http://www.businesswire.com/portal/site/home)
- PR Log (http://www.prlog.org)
- PR Newswire (http://www.prnewswire.com)

Once materials have been distributed, remember to post the materials on the **Recovery Month** website at **http://www.recoverymonth.gov** and link to the materials on appropriate web-based platforms. It is also important to follow up with each reporter that received the materials to ensure they received them and gauge their interest in attending the event or scheduling an interview with a spokesperson or speaker. Refer to the "Work with the Media" document in this toolkit for tips on pitching and advice on communicating with journalists.

Share...

As discussed in the "Promote **Recovery Month** with Events" document in this toolkit, it is important to evaluate an event after it has taken place. The planning committee can use key learnings from an event to improve future events.

- Post press materials on the Recovery Month website (http://www.recoverymonth.gov) to accompany the
 event listing.
- Share event information through **Recovery Month** social media outlets, such as the Facebook page (http://www.facebook.com/RecoveryMonth), YouTube channel (http://www.youtube.com/recoverymonth), and Twitter (https://twitter.com/RecoveryMonth) account.



- Share the event's outreach efforts and talk about the materials that were useful during **Recovery Month** by completing the "Customer Satisfaction Form."
- Send promotional materials electronically to recoverymonth@samhsa.hhs.gov or by mail to:
 Substance Abuse and Mental Health Services Administration
 ATTN: Consumer Affairs/Recovery Month
 Center for Substance Abuse Treatment
 1 Choke Cherry Road, Seventh Floor
 Rockville, MD 20857

Consult Resources...

For more information on **Recovery Month** and services available to people in need, please refer to the following resources:

- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone insuicidal crisis or emotional distress.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.
- The Recovery Month website (http://www.recoverymonth.gov): Contains all the materials from this toolkit and a wide variety of relevant resources.
- **Technical Assistance Centers:** Maximizes self-determination and recovery and assists people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
 - National Consumer Supporter Technical Assistance Center at Mental Health America (http://www.ncstac.org);
 - National Empowerment Center (http://www.power2u.org);
 - o National Mental Health Consumers' Self-Help Clearinghouse (http://www.mhselfhelp.org);
 - o The Family Café (http://familycafe.net); and
 - o The STAR Center (http://www.consumerstar.org/index.html).
- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral health care executives, CEOs, and directors, including health care insurance enrollment training information.



- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment, and recovery support needs of the public.
- **Healthcare.gov (http://www.healthcare.gov/index.html):** Contains information on finding health insurance options, help using insurance, information on the Affordable Care Act, help comparing providers, and information on prevention and wellness resources.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp):
 Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



SAMPLE MEDIA ADVISORY

[Adapt as needed for event by modifying the type of event, date, etc.]

[Name of Official] to Issue Proclamation and Lead Recovery Event to Raise
Awareness of Mental and Substance Use Disorders

Mental and substance use disorders are prevalent in our community, and it's imperative that individuals in [City or State] understand how to seek physical and mental wellness. According to the Substance Abuse and Mental Health Services Administration (SAMHSA), in 2011, an estimated XX [Thousand/Million] people in [City or State] were affected by mental illness, and 31.6 million adults aged 18 or older in the United States received mental health services during the past 12 months. In addition, an estimated XX [Thousand/Million] people in [City or State] were affected by substance use disorders, and 3.8 million people aged 12 or older in the United States received treatment for a substance use disorder.

To address this significant problem, [Name of Official] will issue a proclamation to honor National Recovery Month this September, raising awareness about prevention, treatment, and recovery support services in the area. Additionally, [Name of Expert] will discuss local mental and/or substance use disorder programs and highlight individuals who are in recovery, detailing the paths they took to get where they are today.

Last year, **106** proclamations were issued nationwide, including one by the President of the United States. After the signing of the proclamation, attendees and all citizens of **[City]** are encouraged to join a recovery event around the community to highlight the significance of helping people in need of prevention, treatment, and recovery support services, while also celebrating the accomplishments of individuals in recovery.

WHO: [Participants]

WHEN: [Date and Time]

WHERE: [Address of Location]

CONTACT: [Name and Phone Number of Primary Contact for Event]



SAMPLE PRESS RELEASE

[Adapt as needed for the event by modifying the type of event, date, and local statistics as available.]

For Immediate Release

Contact: [Name of Person Who is Available to Answer Questions From the Media] [Phone Number of Contact Person – Include Office and Cell Numbers] [Email Address of Contact Person]

[Name of Official] Hosts Recovery Event to Raise Awareness of Mental and Substance Use Disorder Support Services in [City or State]

[City, State], [Date] – Mental and substance use disorders and the many pathways to wellness in [City or State] must be addressed immediately, according to [Name of Local Official], who today proclaimed September as National Recovery Month (Recovery Month). To promote the widespread national observance, [Name of official] led a recovery event, which featured opening speakers and was intended to support people in recovery and draw attention to critical prevention, treatment, and recovery support services.

In addition, a walk, attended by more than [Number of People Who Attended the Walk] people, celebrated real-life examples of people in recovery.

Today's event emphasized the importance of seeking physical and mental wellness every day, through multiple pathways and throughout the recovery process, to achieve health and well-being," stated [Name of Official]. "It is critical that people experiencing mental and/or substance use disorders receive the support they need from the community. The reality is that behavioral health is essential to health, prevention works, treatment is effective, and people recover."

[Replace the Following Paragraph With Local Statistics, if Available.] In 2011, 45.6 million people aged 18 or older had a mental illness according to the 2011 National Survey on Drug Use and Health, an annual survey released by the Substance Abuse and Mental Health Services Administration (SAMHSA). However, only 31.6 million people received mental health services. In addition, 20.6 million people were classified with substance dependence or abuse in 2011, and 3.8 million people aged 12 or older received treatment for a substance use disorder.

Opening speakers at the event described the impact of mental and substance use disorders on the community, and joined the crowd on the walk in downtown **[City].** The event also featured the support of local businesses and organizations that recognize the value of seeking treatment and overcoming mental and/or substance abuse disorders.

"It is important that the momentum we've established at this event is carried over to tomorrow, and the next day, week, and year," said **[Name of Person].** "We all have the potential to make a difference. We can all be examples of good health and wellness."

Today's event was part of **Recovery Month**, a national observance sponsored by SAMHSA, within the U.S. Department of Health and Human Services (HHS). The observance raises awareness of mental and substance use disorders, celebrates individuals in long-term recovery, and acknowledges the work of prevention, treatment, and recovery support services.



SAMPLE BACKGROUNDER

[Adapt as needed by including additional organization-specific information or information on the event, etc.]

National Recovery Month Media Fact Sheet

What is National Recovery Month?

National Recovery Month (Recovery Month) is an annual observance celebrated each September since 1989. In September and throughout the year, **Recovery Month** spreads the message that:

- Behavioral health is essential to health;
- Prevention works;
- Treatment is effective; and
- People recover.

Refer to the **Recovery Month** website (http://www.recoverymonth.gov), for additional information on the initiative.

Who sponsors Recovery Month?

Recovery Month is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), in collaboration with approximately 100 **Recovery Month** Planning Partners who represent local, state, and national organizations dedicated to prevention, treatment, and recovery.

What is this year's Recovery Month theme?

This year's theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life.

What events occur during Recovery Month?

Each September – and throughout the year – hundreds of events occur to celebrate **Recovery Month.** These events, ranging from recovery walks and rallies to online web chats and group barbeques, encourage the following audiences to address the continued need for prevention, treatment, and recovery support services:

- Active military and veterans;
- Civic leaders;
- Communities;
- Educators;
- Employers;
- Faith-based organizations;
- Friends and family members;



- Justice system personnel;
- Prevention, treatment, and recovery organizations;
- Recovery community; and
- Social service organizations.

Where can people find treatment for mental and/or substance use disorders?

Many treatment options exist. SAMHSA's treatment website (http://www.samhsa.gov/treatment) offers more than 11,000 specialized facilities in the United States that provide rehabilitation services, behavioral therapy, counseling, and medication support, among many other services. SAMHSA's National Helpline, **1-800-662-HELP (4357)** or **1-800-487-4889 (TDD),** provides 24-hour, free and confidential information about mental and/or substance use disorders, and prevention, treatment, and recovery referrals in English and Spanish. Additionally, the "Treatment and Recovery" document in the **Recovery Month** toolkit provides an overview of support options.

Where can people learn more about the current mental and/or substance use disorder landscape?

Refer to the "Mental and Substance Use Disorders: Fast Facts" document in the **Recovery Month** toolkit for up-to-date statistics on the prevalence of mental and substance use disorders in the United States.

Promote Recovery Month with Events

"Where once I existed in the land of 'nevers,' now I live my dreams in the land of infinite possibilities."

Stanice Anderson

Author, Speaker, and Blogger, The Huffington Post and The WOW Zone Washington, DC Education

Health

Empowerment

CUPPORT

Community

join the voices for recovery

tor recovery
COCETIES

on pathways to wellness



PROMOTE RECOVERY MONTH WITH EVENTS

Each September, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **National Recovery Month**). This national observance increases awareness and understanding of mental and substance use disorders, and promotes the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover.

Organizing an event for **Recovery Month** is an ideal way to celebrate the achievements of the recovery community. Events bring people together to share real-life examples of the power of recovery from mental and/or substance use disorders.

This document guides your event-planning process, providing tips and instructions for how to publicize events to maximize attendance.





Define Goals...

Before planning an event, consider the criteria that will make the event a success. Setting goals will help to determine the type of event that you host, as well as inform what messages will resonate with the attendees. Possible goals include:

- Spread knowledge and awareness about mental and/or substance use disorders and prevention, treatment, and recovery;
- Promote the implementation of prevention, treatment, and recovery support programs in your community;
- Inspire others to champion recovery as possible and attainable; and
- Secure coverage in the media or pickup by blogs or social media platforms to reach those who cannot attend an in-person event or to continue the conversation.

Choose the Event Type...

Events can come in all forms and sizes. Following are types of events that may be of interest:

- Proclamation signing: A proclamation is an official announcement by a public official, usually a political figure.
 The signing gathers people together to generate enthusiasm and awareness for a common cause. By declaring
 September as Recovery Month, officials can alert members of the community that prevention, treatment, and
 recovery support services are available, and that mental and/or substance use disorders are significant issues
 affecting communities nationwide.
- Walk, run, or rally: A walk, run, or rally can draw large crowds of all ages and backgrounds, fostering a celebratory community atmosphere. These events can be sponsored by local businesses and organizations dedicated to mental and/or substance use disorders. Walks or runs often consist of pre-determined lengths and routes, with social opportunities intermingled, while rallies may identify speakers and opportunities to speak with members of the recovery community.
- **Cookout, dinner, or picnic:** Cookouts, dinners, and picnics are easy ways to unite friends, family, and neighbors in a positive environment. These events can be tailored to encourage treatment, celebrate recovery, or support a person's reintegration into society.
- Twitter chat, webinar, and Google Hangout: Technology allows people the opportunity to participate in the online discussion surrounding recovery. These types of events are convenient when you are discussing the role of online services in recovery, such as e-therapy and support chat rooms.
- Forums or discussion groups: Forums and discussion groups are cost-effective, informal ways to bring together members of the community and address local interests. When planning these events, consider engaging civic leaders and elected officials to participate. These events can take place in a variety of settings for example, a provider's office or treatment center, community center, or a place of worship. Attendees should be prepared to engage in a two-way conversation about local issues centered on prevention, treatment, and recovery.

No event is too small to celebrate the accomplishments of individuals in recovery and those who serve them. Be sure to have information on how to get help for mental and/or substance use disorders readily available for event attendees.



Plan the Event...

When planning a **Recovery Month** event, consider the following checklist.

- Form a planning committee: The first step for a successful event involves forming a planning committee. It ensures that the workload is divided evenly between volunteers, staff, and partner organizations. It also encourages the exchange of ideas. The number of committee members depends on the size and scope of the event. A committee leader should convene the committee regularly to create a timeline and develop goals for the event.
- **Determine a budget:** Adhering to a budget is crucial. Deciding on a budget early will inform critical decision-making about the size, shape, and scope of the event, including peripheral tasks, such as marketing and outreach. Other items involved in the budget include fundraising costs, food and entertainment, venue and equipment rentals, permits and licenses, invitations, and speaker fees.
- Plan logistics: Select the event date, time, and venue as soon as possible after the budget is approved. When choosing a location, remember to select a venue that is accessible and appropriate for the type of event and size of the audience. Ask the venue contacts if permits or licenses are required. If the event is in a public location, contact local authorities to confirm the steps that are needed to meet local requirements. When selecting a date and time, consider other events that are occurring in the area to minimize conflicts. Use the following tools to help streamline the search process:
 - o Search for already scheduled local events on http://www.recoverymonth.gov by typing in a zip code in the "Community Events" page. When a date is finalized, post the event on the **Recovery Month** website.
 - o Check event postings in a local newspaper's community calendar, which is often housed on its website. Go to http://www.charityhappenings.org to view a master calendar of nonprofit events, galas, and benefits.
- **Find a sponsor or partner:** Hosting an event can be expensive, but partnering with local organizations, television networks, or small businesses can help offset the cost in exchange for publicity. Support from partners or sponsors may come in the form of money, broadcast coverage, marketing, catering, or other significant expenditures. In addition, local mental illness and/or addiction treatment and recovery centers can provide volunteers from the recovery community to staff an event. **Recovery Month** Planning Partners are potential local resources to collaborate with to garner support, attendees, and/or speakers for an event. Planning Partners are considered experts on mental and/or substance use disorders, and are instrumental in spreading the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover.
- Implement a publicity plan: Successful events will employ both online and traditional means of increasing awareness about an event. Some necessary outreach may involve developing flyers, banners (print and online), and advertisements, as well as using social media to start a dialogue about the event. Print or broadcast journalists, as well as bloggers, can help increase the credibility of an event. Refer to the "Work with the Media" document in this toolkit for more information on garnering publicity for an event and speaking with media. Be sure to brand your event as a **Recovery Month** event by placing the official **Recovery Month** logo on your printed materials.
- **Remember last-minute details:** Hold a final planning meeting in the days leading up to the event. Call vendors and speakers to confirm reservations. If possible, set up any booths or multimedia equipment the day before, and plan to arrive early the day of the event in case of any unexpected issues.



• **Develop a back-up plan:** Successful events have contingency plans in place. If the event location is outdoors, always plan a back-up indoor space, or a well-publicized rain date.

Please refer to the "Community Events" page to access a more detailed checklist and timeline for planning an event.

Evaluate...

Once the event concludes, take time to review key learnings from the event, and discuss the event's positive and negative aspects. A questionnaire is helpful to record feedback from attendees, and follow-up messages by email or social media may elicit audience response following the event. Staff insights are also critical to inform successes and areas to improve on for future events.

After the event, take the opportunity to thank event staff, volunteers, and community leaders for participating in your event by handwriting thank-you letters or posting a thank-you letter to a blog or website.

SAMHSA is pleased to acknowledge the efforts of those who planned and organized events through the *Recovery Month* Community Event Award. The award categories include: Rally and Walk/Run Events, Educational Events, and Special Celebrations. For information on how to enter an event and for an application form, visit

http://www.recoverymonth.gov/Community-Events/Community-Event-Award.aspx.

Be sure to send any event promotional materials to **recoverymonth@samhsa.hhs.gov** and start to brainstorm for next year's **Recovery Month** event!

Share...

SAMHSA wants to hear about all of the events held in honor of **Recovery Month** this year. Once an event takes place, visit **http://www.recoverymonth.gov** to post details, photos, or collaborative materials from the event. The **Recovery Month** Facebook page (http://www.facebook.com/RecoveryMonth), YouTube channel (http://www.youtube.com/recoverymonth), and Twitter (https://twitter.com/RecoveryMonth) also serve as platforms to which event planners or attendees can post details about their experiences. More information about these online tools can be found by visiting the "New Media Glossary" and "Develop Your Social Network" sections in this toolkit for details.

Consult Resources...

For more information on **Recovery Month** and services available to those in need, please refer to the following resources:

- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.



- The Recovery Month website (http://www.recoverymonth.gov): Contains all the materials from this toolkit and a wide variety of relevant resources.
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 - National Mental Health Consumers' Self-Help Clearinghouse (http://www.mhselfhelp.org);
 - o The Family Café (http://familycafe.net); and
 - o The STAR Center (http://www.consumerstar.org/index.html).
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- Healthcare.gov (http://www.healthcare.gov/index.html): Contains information on finding health insurance
 options, help using insurance, information on the Affordable Care Act, help comparing providers, and information
 on prevention and wellness resources.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.

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Recovery Month Public Service Announcements

"When I could no longer control my drinking, I finally stopped and found a new way of living."

Dan O'Laughlin

Recovery Africa Washington, DC and Accra, Ghana Education

service

Help

Healing

Community

join the voices for recovery

oether

on pathways to wellness



RECOVERY MONTH PUBLIC SERVICE ANNOUNCEMENTS

Every year, public service announcements (PSAs) are created for **National Recovery Month** (**Recovery Month**) to encourage individuals in need of treatment and recovery services to seek help. PSAs are unpaid advertisements that air on television and/or radio stations, as well as online, at no cost.

To support the 2013 **Recovery Month** campaign, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), created two radio and television PSAs (http://www.recoverymonth.gov/Multimedia/PSAs.aspx) in English and Spanish. These PSAs, or spots, demonstrate the benefits of prevention, treatment and recovery, as well as advertise SAMHSA's National Helpline. The spots also reflect this year's **Recovery Month** theme, "Join the Voices for **Recovery: Together on Pathways to Wellness."** They highlight the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover from mental and/or substance use disorders. Spreading this message supports SAMHSA's Strategic Initiatives (http://www.samhsa.gov/about/strategy.aspx), including its efforts to increase public awareness of mental and/or substance use disorders.

These PSAs can be used year-round to promote prevention, treatment, and recovery. At the end of each PSA, SAMHSA's National Helpline, **1-800-662-HELP (4357)**, or **1-800-487-4889 (TDD)**, is highlighted. This toll-free number, available in English or Spanish, provides 24-hour, confidential information about mental and substance use disorders and prevention, treatment, and recovery referrals.

Customize...

Each year, **Recovery Month** PSAs are distributed to more than 1,000 television and 3,000 radio stations nationwide. To maximize their circulation, these pre-recorded PSAs are available in 30-, 20-, and 15-second versions. Additionally, "open-ended" versions are available to add your local information to personalize the spots. If possible, work with a local production company to insert supplementary information, such as a website, phone number, or logo. Otherwise, you can promote them "as is."

If stations are unable to play the PSAs during September, remind them that these PSAs can be played year-round. If local television or radio stations do not have the 2013 PSAs, suggest emailing **recoverymonth@samhsa.hhs.gov** to receive a copy. The PSAs are also available online in the "Video, Radio, and Web" section of the **Recovery Month** website at **http://www.recoverymonth.gov.**

Use Scripts...

At the end of this document are two 30-second and two 15-second radio PSA script examples for disc jockeys to read "live" on the air. These scripts can be easily tailored to promote a **Recovery Month** event in the local community. When customizing the live-read scripts to promote an event, keep in mind the following checklist:

- Include only crucial event details to limit the scripts to the allotted time;
- Refer viewers and listeners to a website or phone number for more information;



- Weave in local statistics or information about the prevalence of mental and substance use disorders that resonate with the local community; and
- Ask radio stations if their most popular radio personalities or a community leader who may be visiting the station can help promote the PSAs by reading them live.

Distribute Scripts...

Distribute the live-read PSA scripts to local radio stations to promote an event or the **Recovery Month** campaign in September. Before reaching out to radio stations, identify which stations are most appropriate for the target audience, considering demographic data such as age, gender, race, and location. After selecting your top choices, contact these radio stations to determine if they are interested in receiving the live-read scripts. Also, ask for a specific person who handles these requests, such as a PSA director. When sending PSAs to local stations, it's important to include a cover letter, so the station understands the importance of the event and the **Recovery Month** campaign. Be sure to include contact information in case stations have questions. Refer to the "Work with the Media" document in this toolkit for a customizable pitch letter, and tailor it for use with PSA directors.

Promote Pre-recorded PSAs...

Stress to radio and television stations the importance of these PSAs and how they motivate people in need to seek help by spreading the message that recovery from mental and/or substance use disorders is possible. Start by writing down bullet points or creating a script to use when calling television and radio stations to explain the **Recovery Month** PSAs in detail.

To spread the word online, email the PSAs to *Recovery Month* supporters. Ask them to forward the pitch email, along with the PSA spots, to anyone who may find them useful. Be sure to include your contact information and an explanation of why the PSAs are important. If the supporters you contact have a website, they can embed the PSAs from the *Recovery Month* website (http://www.recoverymonth.gov), Facebook page (http://www.facebook.com/RecoveryMonth), and YouTube channel (http://www.youtube.com/user/recoverymonth). Typically, an "embed code" link is included near the video, which enables copying and pasting the video to other websites. For questions regarding embedding *Recovery Month* PSAs, email recoverymonth@samhsa.hhs.gov for assistance.

Personalize:

Below are resources to help localize your message and convey the importance of recovery to a station's listeners.

- Single-State Agency (SSA) Directory
- SAMHSA's National Survey on Drug Use and Health (http://www.samhsa.gov/data/NSDUH.aspx)
- SAMHSA's Recovery Statement (http://blog.samhsa.gov/2012/03/23/defintion-of-recovery-updated/)
- SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS) (http://wwwdasis.samhsa.gov/dasis2/nssats.htm)
- SAMHSA's Drug Abuse Warning Network (http://www.samhsa.gov/data/DAWN.aspx)
- SAMHSA's Treatment Episode Data Set (http://www.oas.samhsa.gov/DASIS.htm#teds2)



If you host a **Recovery Month** event, you can play the PSAs during the event to enhance the message. Set up a TV and play the PSAs on repeat, or display them on a big screen with loudspeakers. For additional information on how to plan a successful **Recovery Month** event, refer to the "Promote **Recovery Month** with Events" document in this toolkit.

Consult Resources...

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- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
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 - o The Family Café (http://familycafe.net); and
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- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral health care executives, CEOs, and directors, including health care insurance enrollment training information.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment, and recovery support needs of the public.
- Healthcare.gov (http://www.healthcare.gov/index.html): Contains information on finding health insurance
 options, help using insurance, information on the Affordable Care Act, help comparing providers, and information
 on prevention and wellness resources.



• SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.

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2013 Live-Read Radio PSA Scripts

:30

If you have an addiction or mental health issue, you are not alone. With the support of others, you can find your path of recovery from mental and/or substance use disorders.

This September, celebrate **National Recovery Month**, and help yourself or someone you love take the first step toward recovery.

For more information or treatment referral, call 1-800-662-HELP (or replace this number with a local treatment provider's) or visit www.recoverymonth.gov.

:15

If you have a mental and/or substance use disorder, you can find your path of recovery.

This September, celebrate *National Recovery Month* and call **1-800-662-HELP** (or replace this number with a local treatment provider's) for information or treatment referral, or visit www.recoverymonth.gov.

Share Your Voice Through Op-Eds and Online Articles

"I am a living testimony that you can make it through if you have faith and, in my case, family."

Jaquese Armstrong Edison, NJ

Empowerment

Courage

Education

Confidence

on pathways to wellness



SHARE YOUR VOICE THROUGH OP-EDS AND ONLINE ARTICLES

People's opinions are often shaped by what they read in the media, whether in newspapers or online. The media is a powerful mechanism for spreading information, and placing an op-ed or bylined piece in a print or online media outlet can help raise awareness about **National Recovery Month (Recovery Month).** An op-ed, short for "opposite the editorial pages" of a newspaper, is a way to express opinions and perspectives on a certain subject or initiative. Writing about **Recovery Month** in any publication can promote understanding of mental and substance use disorders in your community, town, city, territory, or state.

This document includes helpful tips on how to write an op-ed or online article and how to submit it for publication.

Get Started...

The 2013 **Recovery Month** theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life. The theme also highlights that people are not alone in this journey to seek total health every day. Family, friends, and community members can support individuals throughout the entire recovery process.

Think about this theme when you brainstorm ideas for your op-ed or online article. Also consider the purpose of **Recovery Month** – to spread the message that behavioral health is essential to overall health, prevention works, treatment is effective, and people recover.

To help you gain more attention, note that the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors the *Recovery Month* observance annually across the country.

Plan appropriately and start writing early to place your op-ed or opinion piece – either in print or online – during **Recovery Month** in September. Refer to the checklist below to stay on track:

- **Determine a clear and concise message:** A strong op-ed or online article makes a single point or argument persuasively in the beginning of the piece. Explain topics through simple messaging, so readers can stay focused and walk away with the main point.
- **Think current:** Make the subject of an op-ed or article timely and relevant to the general public. Consider tying your piece to a recent event or news story.
- **Personalize it:** Include a personal story to help readers easily connect with the message. Be sure to ask for permission before sharing someone's personal story.
- Locate statistics and facts: Validate all statements or opinions with hard facts. For example, if you want to note that mental and/or substance use disorders are common and more prevalent than one might think, include statistics on the prevalence to prove that statement. Resources provided later in this document offer a starting point for finding those statistics.



- **Think local:** Give the article a local angle to increase chances that a print or online outlet will publish the piece. Feature local residents in your op-ed or article, address recent local events, and include statistics that are specific to your city or state.
- **Keep it brief:** Op-ed or online articles should be between 400 and 750 words. Check with publications to determine specific limitations on word count or other requirements, such as deadlines and how they prefer to receive submissions.
- Identify the appropriate publication(s): Assess which publication is the best fit for a particular op-ed. A local newspaper might be ideal if the article focuses on community issues. If the article focuses on a broader, national issue, try a newspaper with a higher circulation. Remember that most publications will not publish op-eds that were already published in another outlet. For this reason, prioritize each outlet and select your top choices, followed by back-up options. Read examples of past op-eds to get a sense of what formats and topics appear to capture the publication's interest.
- **Create a relationship:** The best way to have your thoughts published or posted is to develop a relationship with the editor in advance. Always plan out what you want to say before contacting the publication. Provide background information about yourself, your organization, and **Recovery Month**, in addition to any local and state recovery issues.
- **Refer to the template:** Consult the sample op-ed at the end of this document to help initiate the writing process.

To gain additional attention for your op-ed, contact well-known organizations in the community and offer to co-write an op-ed or online article with them. An established partner might catch the eye of an editor and increase the chances that your op-ed is published. Refer to the "Prevention, Treatment, and Recovery Resources" document in this toolkit to see organizations that you could collaborate with in your area.

Write...

Select a topic and statistics with a local angle to support your information about **Recovery Month** and its mission, along with this year's theme. Avoid controversial statements or imposing beliefs on others, but do take a clear position on the issue. Also, consider the publication's readers when writing an op-ed or online article, and think about what would catch their attention and create interest in **Recovery Month**.

Refer to the below tips when writing an op-ed or online article:

- Include an eye-catching title that emphasizes central messaging;
- Make it personal and include true stories to connect with readers;
- Clearly restate your main points at the end of the op-ed and issue a call to action;
- Avoid technical jargon and acronyms most newspapers are written at a fifth grade level; and
- Include your name, contact information, and a description of who you are and your qualifications at the end of the piece.



Personalize:

Refer to the resources below for facts to make an op-ed or online article more compelling:

- Single-State Agency (SSA) Directory
- SAMHSA's National Survey on Drug Use and Health (http://www.samhsa.gov/data/NSDUH.aspx)
- SAMHSA's Recovery Statement (http://blog.samhsa.gov/2012/03/23/defintion-of-recovery-updated/)
- SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS) (http://www.dasis.samhsa.gov/dasis2/nssats.htm)
- SAMHSA's Drug Abuse Warning Network (http://www.samhsa.gov/data/DAWN.aspx)
- SAMHSA's Treatment Episode Data Set (http://www.oas.samhsa.gov/DASIS.htm#teds2)
- SAMHSA's Store (http://store.samhsa.gov/home)

Publish...

When submitting an op-ed or online article, include a brief cover letter to establish why you are qualified to write the piece and why it is timely, along with a simple explanation of why recovery from mental and/or substance use disorders is important to readers. When trying to place your piece in a publication or online, be sure to:

- Place a follow-up call: Follow up with the editor one week after submitting the op-ed or article. If he or she has not had time to look at it yet, follow up again one week later. Remember to be polite and state that publishing your piece will help others who may not know where to turn.
- **Set a time limit:** Since most publications will not send notification if an op-ed is rejected, set a deadline for your piece to be published. If the deadline passes, move on to the next outlet and gauge their interest in publishing the piece. Don't give up!

If your op-ed is rejected from your desired publications, consider alternatives to the traditional printed op-ed. Ask the publication's website editor if op-eds can be posted on the online version of the newspaper. Online opinion pieces can be much easier to share with others through social media outlets such as Twitter (http://www.twitter.com) and Facebook (http://www.facebook.com).

Also consider that many newspapers now have online bloggers who cover local philanthropic events, and some may accept guest post contributions to discuss mental and/or substance disorders or a **Recovery Month** event in your area. Use the sample op-ed at the end of this document as a guide for a guest post, but remember to write in a more casual, personal manner when blogging. If a blogger does not agree to a guest post, offer information about **Recovery Month** and prevention, treatment, and recovery of mental and/or substance use disorders, and encourage the blogger to write his or her own post on the topic or link to a local **Recovery Month** event's website.



Keep in mind that **Recovery Month** celebrates individuals in long-term recovery, acknowledges those who provide prevention, treatment, and recovery support services, and empowers those in need of help to seek treatment throughout the year. Even if your op-ed or online piece does not get published in September, keep trying throughout the rest of the year to help spread these crucial messages.

Share...

SAMHSA is interested in receiving copies of published op-eds and hearing about any successes in promoting **Recovery Month.** Be sure to check news sites such as Google News (https://news.google.com) or Yahoo News (http://news.yahoo.com) to see if an op-ed is published or whether other outlets have picked it up. Posting on personal social media accounts is also a great way to share an op-ed. In particular, you can:

- Post a published op-ed on the *Recovery Month* website (http://www.recoverymonth.gov), and a personal Facebook page (http://www.facebook.com/RecoveryMonth) and Twitter account (http://twitter.com/recoverymonth). Visit the "New Media Glossary" and "Develop Your Social Network" documents in this toolkit for assistance on how to use these online tools.
- Distribute event details, materials, and pictures to the social media channels above.
- Send a copy of your published op-ed and placement information electronically to recoverymonth@samhsa.hhs.gov or by mail to:

Substance Abuse and Mental Health Services Administration ATTN: Consumer Affairs/**Recovery Month** Center for Substance Abuse Treatment 1 Choke Cherry Road, Seventh Floor Rockville, MD 20857

Also, please fill out the "Customer Satisfaction Form" to share local outreach efforts and give feedback.

Consult Resources...

For more information on **Recovery Month** and services available to people in need, please refer to the following resources:

- SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.
- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.
- The *Recovery Month* website (http://www.recoverymonth.gov): Contains all the materials from this toolkit and a wide variety of relevant resources.



- SAMHSA ADS Center's "Working with the Media to Support the Campaign for Mental Health Recovery" Webcast (http://www.promoteacceptance.samhsa.gov/CMHR/webcasts/default.aspx):

 Provides helpful tips for contacting the media and useful strategies for organizing outreach efforts.
- **Technical Assistance Centers:** Maximizes self-determination and recovery and assists people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
 - National Consumer Supporter Technical Assistance Center at Mental Health America (http://www.ncstac.org);
 - National Empowerment Center (http://www.power2u.org);
 - o National Mental Health Consumers' Self-Help Clearinghouse (http://www.mhselfhelp.org);
 - o The Family Café (http://familycafe.net); and
 - o The STAR Center (http://www.consumerstar.org/index.html).
- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral health care executives, CEOs, and directors, including health care insurance enrollment training information.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment, and recovery support needs of the public.
- Healthcare.gov (http://www.healthcare.gov/index.html): Contains information on finding health insurance
 options, help using insurance, information on the Affordable Care Act, help comparing providers, and information on
 prevention and wellness resources.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



SAMPLE OP-ED

OP-ED TEMPLATE: Approximately 524 words

Recovery from Mental and/or Substance Use Disorders is Possible

All around us in **[Community]**, it is estimated that **[XX]** people are in recovery from mental and/or substance use disorders. They are contributing to our businesses, connecting with their families, and giving back to the community. But if we want more people to join them on a path of recovery, we need to take action – now. Too many people are still unaware that prevention works, and that these conditions can be treated, just like we can treat other health disorders such as diabetes and hypertension. We need to work together to make recovery the expectation.

Having [Been in Long-term Recovery for XX Years / Worked in the Recovery Field for XX Years / Other Statement of Personal Experience], I have seen firsthand the benefits of recovery. Individuals who embrace recovery achieve improved mental and physical health, as well as stronger relationships and a sense of self-worth. Mental and/or substance use disorders do not discriminate – they affect people of all ethnicities, ages, genders, geographic regions, and socioeconomic levels. An estimated [Number] people needed treatment last year in [Community/City/Town/State], and we need to address this real issue.

We can't get discouraged by the prevalence of these problems, because help is available. In fact, in 2011, 31.6 million adults aged 18 or older received services for mental illness in the past year, and 2.3 million people aged 12 or older who needed treatment for an illicit drug or alcohol use problem received treatment at a specialty facility.

These individuals have achieved healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They need the support of a welcoming community to help them on their path of long-term recovery. Fortunately, more than 80 percent of Americans would think no less of a friend or relative who is in recovery from addiction.

To further educate communities about the pathways to recovery and to support people in recovery, every September, people throughout the nation celebrate **National Recovery Month (Recovery Month)**, an initiative sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

In addition, the Affordable Care Act (ACA) and the Mental Health Parity and Addiction Equity Act (MHPAEA) will significantly enhance access to the prevention, treatment, and recovery support service coverage for persons with, or at risk of, mental and/or substance use disorders. According to SAMHSA's 2010 National Survey of Drug Use and Health (NSDUH), providers will need to be prepared to provide services to up to an additional 11 million uninsured people with behavioral health problems. These providers have a unique opportunity to assist these populations navigate the insurance eligibility determination and enrollment process.

[Name of Organization] is celebrating *Recovery Month* by holding a variety of educational and entertaining events [Or Name Specific Event] to honor individuals and families who are in long-term recovery. A huge turn-out at these events will send a signal that [Community] embraces recovery and supports those working in the field to provide much-needed recovery services.



I urge local businesses, community organizations, colleges, schools, administrators, and government agencies to get involved in these activities. Let people know that free, confidential help is available 24 hours a day through SAMHSA's National Helpline, **1-800-662-HELP (4357)** or **1-800-487-4889 (TDD).** Additionally, you can provide information about local treatment and recovery resources on your website and link to additional information available at http://www.recoverymonth.gov.

These are small and easy steps to take, and they can make a tremendous difference in the lives of many in our community. We shouldn't think twice about getting involved because together, we make recovery a reality.

[Include Author Name, Title, and Brief Summary of Qualifications That Make Him or Her an Expert on this Topic.]

Work with the Media

"Today, I love my life, and I am grateful for the challenges that have come my way."

Karen

Prevention Engagement

Education

Health

Community

join the voices for recovery

coether

on pathways to wellness



WORK WITH THE MEDIA

Building relationships with members of the media is essential to the success of **National Recovery Month (Recovery Month).** The term "media" refers to the mass means of communication that reach many people through different channels, including broadcast, print, web, and other social media platforms.

Media outreach and the resulting coverage will increase awareness of events and highlight community efforts focused on mental and/or substance use disorders. Each September, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), sponsors **Recovery Month.** This national observance increases awareness and understanding of mental and substance use disorders, and promotes the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover.

This document includes the basics of media outreach, including tips on speaking with the media and creating long-term relationships.

Determine a Focus...

To begin, it is important to differentiate your **Recovery Month** event from other activities in the area since members of the media receive many requests to attend and cover events.

When determining the focus of your media outreach, use the following factors to increase your chances of coverage:

- **Hot topics:** In the crowded news space, a fresh and relevant angle will ensure that an event is considered. Check out health care trends, such as new research or policies, which may be driving the conversation in the news or on blogs.
- Impact: Research compelling and current statistics that illustrate the prevalence of mental and/or substance use disorders, both locally and nationally. For an example, the "Mental and Substance Use Disorders: Fast Facts" section of the toolkit features relevant behavioral health facts. You can use this information to create and supplement a localized fact sheet that outlines the effect of mental and/or substance use disorders in your area.
- **Proximity:** Media outlets have less money to spend on staffing and travel, so make sure the target is the most appropriate outlet or person. When pitching, emphasize the direct connection of the event to the local community, such as the appearance of a local dignitary.
- **Timeliness:** When contacting reporters, take into account how frequently their publications are distributed. Many reporters may request an advance lead time to write about an event before their publications go to print. Other reporters, such as those for broadcast outlets, may only cover "breaking news" live at the event site.

Research...

After establishing the key, newsworthy aspects of your event, identify the appropriate outlets and reporters to contact. To find out who has covered behavioral health topics, set up Google Alerts (http://www.google.com/alerts) online, which notify you when news on a certain topic is published. Google Blog Search (http://www.google.com/blogsearch) is a useful tool to find bloggers, and social media may be useful in engaging the media.



Organize...

It is helpful to keep your media contacts' information organized and accessible. Media lists are best created in a spreadsheet database program. Once you have identified a potential contact, include the following information in your spreadsheet:

- Contact name;
- Contact's outlet and title;
- Email;
- Facebook and Twitter handle;
- Phone number; and
- Pertinent notes (e.g., preferred time and method of contact, previous articles on recovery topics, and remarks from your interactions with this person).

Connect...

Once the list is complete, reach out to reporters via phone or email, depending on each contact's individual preferences. Reporters often have time limitations, so keep the message short when "pitching" the event. Refer to the end of this document for sample pitches and phone scripts.

Bloggers tend to respond to people they have engaged with previously, so it may be beneficial to send an introductory email to the blogger to break the ice and develop a relationship. Once a relationship is established, follow up with details of the **Recovery Month** event.

Likewise, when "pitching" reporters, start with an introduction and then ask about their availability. Don't be discouraged if a journalist is short with you or in a hurry. Instead, offer to call back at a different time or connect with a colleague who may be interested in talking about the event.

After the conversation, thank each media contact for his or her time and exchange contact information to set expectations for potential follow-up. Also, offer to send event materials (such as a promotional flyer) for further details. Confirm by email or phone if they will attend.

Interview...

Reporters who cover an event may request an interview with the host, a speaker, or key member of the host organization. If your team is presented with an opportunity to be interviewed by a member of the media, prepare for the discussion in advance. Research the interested media contact and anticipate the types of questions that may be asked. To best answer the questions, familiarize yourself with the event and all supplementary materials. Finally, practice answering questions with a peer or colleague.

The day before the interview, confirm the logistics and anticipated length of the interview. Whether your interview will be in-person or on the phone, always be professional and polite. Keep in mind that the goal of the interview is to communicate **Recovery Month** key messages, event details, and describe the importance of prevention, treatment, and recovery support services in the local area.



The following tips may also be useful in an interview:

- **Bridging:** This technique allows you to stay on message and avoid answering questions that may steer the conversation to unanticipated areas. Instead of answering the question head on, find a component of the question that can be tied back to one of the main points. For example, a person may say, "That's a great example of the power of recovery..." and then launch into a main talking point about recovery.
- **Bundling:** This technique allows a person to state a key point and then explain their justification for making the point. For example, a key message may include the phrase, "SAMHSA has a series of initiatives that improve prevention, treatment, and recovery support services." This would be followed by important follow-up points that back up the key message: "**Recovery Month** supports these initiatives by..."
- **Blocking:** If a reporter asks you a question that you are uncomfortable answering, avoid saying "no comment," as it may appear you are hiding something. Instead, offer to put the reporter in contact with someone who can accurately answer the question.

For a successful in-person interview, remember to maintain eye contact, sit up straight, control hand movements, demonstrate enthusiasm and genuine feelings in your voice, and dress professionally. For a successful phone interview, be sure to prepare by rehearsing and drafting notes. Find a quiet place to hold the call, convey a friendly tone in your voice, and ask follow-up questions if needed.

Practice...

When speaking with the media, it may be helpful to use the following talking points about **Recovery Month**, which can be event-specific.

- For a Specific Event: On [Date] at [Time], [Organization] is hosting [Event or Activity] at [Location] to celebrate recovery and encourage individuals with a mental and/or substance use disorder to seek treatment and achieve a healthy, happy life. Mental and/or substance use disorders can affect anyone, including people in [City], where [Number] people are affected. Our community must remain vigilant and dedicated to the recovery process by helping people address these preventable and treatable conditions, and support individuals in recovery, as well as their family members.
- To Promote Recovery Month: [Organization]'s activities are part of National Recovery Month (Recovery Month), which is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). This year, [Organization] will be observing Recovery Month by [Include the name and brief description of your Recovery Month activities].

Consult Resources...

For more information on **Recovery Month** and the services available for those in need, please refer to the following resources:

• SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD) (http://www.samhsa.gov/treatment): Provides 24-hour, free, and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English and Spanish.



- National Suicide Prevention Lifeline, 1-800-273-TALK (8255) (http://www.suicidepreventionlifeline.org): Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (http://www.samhsa.gov/treatment): Contains information about treatment options and special services located in your area.
- The Recovery Month website (http://www.recoverymonth.gov): Contains all the materials from this toolkit and a wide variety of relevant resources.
- SAMHSA ADS Center's "Working with the Media to Support the Campaign for Mental Health Recovery" Webcast (http://www.promoteacceptance.samhsa.gov/CMHR/webcasts/default.aspx):

 Provides helpful tips for contacting the media and useful strategies for organizing outreach efforts.
- **Technical Assistance Centers:** Maximizes self-determination and recovery and assists people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
 - National Consumer Supporter Technical Assistance Center at Mental Health America (http://www.ncstac.org);
 - National Empowerment Center (http://www.power2u.org);
 - National Mental Health Consumers' Self-Help Clearinghouse (http://www.mhselfhelp.org);
 - o The Family Café (http://familycafe.net); and
 - The STAR Center (http://www.consumerstar.org/index.html).
- **BHBusiness (http://www.saasnet.org/bhb):** Offers targeted training and support for behavioral health care executives, CEOs, and directors, including health care insurance enrollment training information.
- Center for Financing Reform and Innovation (http://www.samhsa.gov/healthreform): Supports the need for information, analysis, products, and technical assistance to address significant changes in the organization and financing of behavioral health care, as well as the need to guide and support governments and people on how to most effectively and efficiently use available resources to meet the prevention, treatment and recovery support needs of the public.
- Healthcare.gov (http://www.healthcare.gov/index.html): Contains information on finding health insurance
 options, help using insurance, information on the Affordable Care Act, help comparing providers, and
 information on prevention and wellness resources.
- SSI/SSDI Outreach, Access, and Recovery (SOAR) (http://www.prainc.com/soar/about/default.asp): Increases access to Supplemental Security Income and Social Security Disability Income for eligible adults who are homeless or at risk of homelessness and have a mental and/or substance use disorder.

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Sample Pitch Email

Hello [Name],

I recently noticed your article on **[Topic]**, and I thought you may be interested in an upcoming event celebrating people in recovery from mental and/or substance use disorders. In our community, behavioral health issues affect many people: **[Insert Statistic on Local Prevalence]**. On **[Event Date]**, **[Name of Host Organization and any Noteworthy Attendees]** will host **[Type of Event]** in the **[City/Town Name]** area as part of **National Recovery Month** (**Recovery Month**), a large national observance. This event increases awareness and understanding of mental and substance use disorders, and promotes the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover.

Recovery Month is sponsored each September by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

Included in this message is a media advisory that provides additional details of the event. Please feel free to contact me if you need further information or would like to schedule an interview with [Name and Title of Person Being Offered for Interviews]. I will follow up prior to the [Event] to see if you or someone from your organization will be attending.

Thank you for your time and consideration.

Best regards,

[Your Name and Contact Information]



Sample Pitch Call Script

Hi [Name],

My name is **[Your Name]**, and I am calling on behalf of **[Name of Organization]**. An upcoming event in our community will emphasize the seriousness of mental and substance use disorders. Do you still cover **[Reporter's Beat – Health Care, Community Events, etc.]** and have a moment to chat?

As you may know, mental and substance use disorders are common, and not everyone receives the support they need to get better. [Insert Local Prevalence Statistics to Support the Local Community Impact.] Despite the prevalence of these conditions, recovery from mental and/or substance use disorders is possible.

We are hosting an event on [Date] in [City] as part of National Recovery Month, an annual observance sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). The goals of the event are to increase awareness and understanding of mental and substance use disorders, and promote the message that behavioral health is essential to health, prevention works, treatment is effective, and people recover.

If you are interested in learning more about the event, please contact [Spokesperson Name] at [Spokesperson's Contact Information]. I also have additional information I can send you. Is your email address [Email Address]?

Please let me know if you have any additional questions. My contact information will be included in the email, and I will follow up prior to the **[Event]** to see if you or someone from your organization will be attending.

Thank you for your time, and I hope to speak with you again soon.

Build Community Coalitions

"If I am hurting, I have learned it is okay to find a friend I trust and let them know what I am going through."

Lisa E. Overton

Board Member, A New PATH
(Parents for Addiction Treatment & Healing)
Spring Valley, CA

Community Prevention Strength **Accomplishment** service

join the voices for recovery

OP OP ON Pathways to wellness





BUILD COMMUNITY COALITIONS

Community coalitions are alliances of people representing diverse organizations that work together to achieve a common goal. They are critical to the success of **National Recovery Month (Recovery Month)**, an annual observance that promotes that behavioral health is essential to health, prevention works, treatment is effective, and people recover from mental and/or substance use disorders.

Effective coalitions combine the resources of multiple organizations and individuals to convey a strong message. Widespread support achieved by coalitions helps educate a broader audience that mental and/or substance use disorders affect all people. This document provides details on how to form a community coalition or partnership, starting with how to research and identify groups and individuals to partner with.

Learn the Specifics...

Coalitions are comprised of a wide range of individuals and organizations. Some coalitions represent business, education, religious or social groups, or the behavioral health community. Others may work on behalf of an elected official. Not all coalition members have to be affiliated with an organization; however, it's vital that members share common goals about mental and/or substance use disorders that focus on the promotion of prevention, treatment, and recovery support services.

To support **Recovery Month**, you can either join an existing group or create your own coalition. Joining an existing coalition requires less effort for an individual or organization. However, by creating a coalition, individuals and organizations gain greater flexibility to select members that are aligned with the coalition's goals and strategic direction.

Create a Coalition...

If creating a coalition is the most appropriate option, there are tips that can help streamline the process and make the coalition as successful as possible. Individuals or organizations should ask the following questions before creating a coalition:

- What issues are important? What are the goals of this coalition? By assessing the local behavioral health environment, coalitions can identify the opportunities and challenges in the community. These issues may be related to prevalence of mental and/or substance use disorders, affected populations, or the availability of prevention, treatment, and recovery support services.
- What organizations or individuals closely support this coalition's goals and intended outcomes? Identify people and organizations that will make influential and positive contributions to a *Recovery Month* coalition. Search for those affiliated with state or local chapters of prominent national prevention, treatment, and recovery support organizations, as well as other individuals that can make a difference in the community. Refer to the "Single-State Agency Directory" in this toolkit for state and local services, as well as the "Prevention, Treatment, and Recovery Resources" list for national organizations, and the "Planning Partners" section for organizations dedicated to the *Recovery Month* effort.



- Are local organizations or behavioral health-focused coalitions already active in this area? Monitor the news for recent stories about mental and/or substance use disorders, and observe organizations or individuals who are involved in the discussions on these issues. Organizations that may have the resources and expertise needed to build a successful coalition around mental and/or substance use disorders are included in the following list:
 - Adult independent-living communities;
 - Child welfare organizations;
 - Criminal justice system representatives and organizations;
 - Elected officials;
 - Foundations and volunteer groups;
 - o Government agencies;
 - Health-related organizations;
 - o Individual and family therapists;
 - Mental health organizations;
 - Military associations;
 - National and local media outlets;
 - Neighborhood clubs;
 - Nonprofit organizations;
 - Prevention groups;
 - o Private companies/businesses;
 - Recovery bloggers;
 - Recovery community;
 - Recovery and peer-to-peer support groups;
 - Religious organizations;
 - Schools, universities, and the educational community;
 - o Treatment and recovery organizations; and
 - Veterans' associations.

It's important that the relationships within a coalition are mutually beneficial. For a coalition to be most effective, each member must be committed to the mission and work collaboratively. Take the following steps to ensure robust participation and maximize results:

• Recruit members to the coalition. Contact potential allies and invite them to join the coalition. Be sure to mention any references or existing connections within their organization that will incite further interest or establish credibility. When recruiting others to participate in the effort, have substantive materials to present, describing the mission, goals, and vision of the coalition to advance prevention, treatment, and recovery support services. Have a proper role within the coalition for each partner already identified. The following tools will help recruit members and build a coalition from the ground up:



- Social media, such as Facebook (http://www.facebook.com) or Twitter (http://www.twitter.com);
- Email:
- A website encouraging people to join;
- Virtual meetings; and/or
- Online services to organize meetings simultaneously across the country, such as Meetup (http://www.meetup.com) or Google Hangout (http://www.google.com/+/learnmore/hangouts).
- Hold regular meetings during the coalition-formation process. Members must work collaboratively to ensure a mutually beneficial relationship. Due to busy schedules, bi-weekly or monthly meetings are probably more feasible than holding weekly meetings. Online tools, such as Windows Live Meeting (http://office.microsoft.com/en-us/live-meeting), WebEx (http://www.webex.com), and iChat (http://www.apple.com/macosx/apps/all.html), make it easier to collaborate and allow people to work remotely, rather than at the same location.
- **Develop an order of operations.** For the coalition to be successful, keep in mind these guidelines:
 - Set priorities and goals;
 - Be respectful of time commitments;
 - Decide the coalition's leadership early in its development;
 - Allow all members to have an active role in planning and decision-making;
 - o Identify a leader to moderate and make final decisions;
 - Agree on a communication process and responsibility for maintaining it;
 - Prepare a budget for activities and assign a person to manage it; and
 - Identify a main contact person to coordinate members.

A Proven Coalition Model...

Community coalitions have helped bring awareness to issues surrounding mental and/or substance use disorders for years. The *Recovery Month* campaign uses a coalition of *Recovery Month* Planning Partners. Organized in 1997, the Planning Partners include groups involved in the mental health and substance use prevention and treatment fields. The group works together to establish goals and set priorities for *Recovery Month* every year. For a list of the Planning Partners, refer to the "Planning Partners" directory in this toolkit. Additionally, SAMHSA, the Office of National Drug Control Policy (ONDCP), and the U.S. Department of Justice fund hundreds of community partnerships throughout the country.

Consult Resources...

Recovery Month Planning Partner organizations provide resources to help create a successful coalition. Listed below are just a few partner organizations. For a full list, see the "Planning Partners" directory in this toolkit.

Alcoholism and Substance Abuse Providers of New York State (ASAPNY) Alcoholism and Substance Abuse Providers of New York State (ASAPNY) (http://www.asapnys.org)

This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.

518-426-3122



American Mental Health Counselors Association (AMHCA) (http://www.amhca.org)

This association works exclusively for licensed mental health counselors by advocating for legislation that expands, enhances, and protects the right to practice; promotes mental health awareness; and builds the profession of mental health counseling nationally. AMHCA is dedicated to helping mental health counselors expand their professional knowledge and network of professional peers.

800-326-2642 (Toll-Free) 703-548-6002

Community Anti-Drug Coalitions of America (CADCA) (http://www.cadca.org)

This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.

800-54-CADCA (22322) (Toll-Free) 703-706-0560

Faces & Voices of Recovery (http://www.facesandvoicesofrecovery.org)

This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, as well as their families, friends, and allies in campaigns to end discrimination and make recovery a reality for even more Americans.

202-737-0690

International Association of Peer Supporters (http://na4ps.wordpress.com/mission)

This organization has 1,200 members and supporters representing every state plus the United Kingdom, Australia, Canada, and Japan. It promotes the inclusion of peer supporters throughout mental and behavioral health systems worldwide.

585-797-4641

Mental Health America (MHA) (http://www.nmha.org)

This is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With nearly 300 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service. The local affiliates provide public education, information and referral, support groups, rehabilitation services, socialization, and housing services to those confronting mental illness and to their loved ones.

800-969-6642 (Toll-Free) 703-684-7722

National Association for Children of Alcoholics (NACoA) (http://www.nacoa.org)

This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. NACoA provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.

888-55-4COAS (2627) (Toll-Free) 301-468-0985



National Coalition for Mental Health Recovery (NCMHR) (http://ncmhr.org)

This organization ensures that consumer/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the state and national levels, empowering people to recover and lead a full life in the community.

877-246-9058

National Council on Alcoholism and Drug Dependence, Inc. (NCADD) (http://www.ncadd.org)

Founded in 1944, NCADD and its Affiliate Network is a voluntary health organization dedicated to fighting the nation's #1 health problem – alcoholism, drug addiction, and the devastating consequences of alcohol and other drugs on individuals, families, and communities. NCADD focuses on increasing public awareness and understanding of the disease through education, prevention, information and referral, intervention, treatment services, advocacy, and recovery support services, and has helped millions of individuals and family members into recovery.

800-NCA-CALL (622-2255) (Hope Line) (Toll-Free) 212-269-7797

National Inhalant Prevention Coalition (NIPC) (http://www.inhalants.org)

This public-private effort promotes awareness and recognition of the underpublicized problem of inhalant use. It serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a week-long national grassroots education and awareness campaign.

800-269-4237 (Toll-Free) 423-265-4662

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Develop Your Social Network

"I now understand that it's okay to get help – from family, friends, counselors, doctors, recovery groups, and yes, even medications."

Daphne

Freelance Writer and Homemaker Lakeland, FL

Engagement Community

join the voices for recovery

OPE OPE On pathways to wellness



DEVELOP YOUR SOCIAL NETWORK

Social media effectively connects people across the world who are passionate about issues such as **National Recovery Month** (**Recovery Month**). Blog and social media platforms, such as Facebook (http://www.facebook.com) and Twitter (http://www.twitter.com), provide individuals and organizations with an easily accessible, cost-effective way to interact with a diverse and expansive audience. Social media also offers measurable results, giving users an opportunity to analyze trends and adjust messaging as needed. This document offers tips on how to use social media and social networks to spread the **Recovery Month** message in September and throughout the year. It is helpful for both beginners and more experienced social media users. Beginners can also refer to the "New Media Glossary" document in this toolkit, which defines relevant terms.

Recovery Month is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov). This year's theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent behavioral health issues, seek treatment, and sustain recovery as part of a commitment to live a mentally, physically, emotionally, and spiritually healthy life.

Get Started...

To start, set your objectives. This will help determine the level of involvement needed within the social media network. For example, you could aim to increase your number of Twitter followers by 10 percent each month, or to write a new blog post each week. Keep goals in mind when creating a personal profile, account, or page, and remember the option to start small and build the conversation on other platforms later.

To begin social media engagement, start by searching social networking sites for organizations or social media users that have similar objectives. Below are some tips that can foster shared support for a personal Facebook page, Twitter account, or blog.

- Post positive statements on another user's wall;
- "Like" another Facebook page;
- "Follow" another Twitter account;
- Update a status to promote another page or initiative. By placing an "@" in front of the user's name on Facebook or Twitter, for example @RecoveryMonth, a status will link directly to the Recovery Month Facebook page (http://www.facebook.com/RecoveryMonth) or the Recovery Month Twitter account (https://twitter.com/RecoveryMonth) (depending on which platform you are on);
- Recommend that friends visit a Facebook or Twitter page;
- Share or re-tweet a positive message about prevention, treatment, or recovery issues;
- Promote another page's event if it relates to **Recovery Month** messaging; and
- Comment on a helpful blog post and share it through a personal blog.



Use Blogs to Reach Out...

Blogs can serve as a forum to create online communities for people with similar interests or who support the same causes, such as recovery from mental and/or substance use disorders. A regularly updated blog can share information and opinions, and encourage people to react and respond through comments. Keep in mind that blogging requires a significant time commitment. Coming up with regular new content and posts are factors that make a blog successful. You can also consider

Add the *Recovery Month* Events Widget (http://www.recoverymonth.gov/Community-Events/Events-Widget.aspx) to promote your specific event or all *Recovery Month* events on a blog or website.

participating in existing conversations on other blogs, rather than starting a personal blog, if posting new entries on a consistent basis might not be feasible.

Before you create a personal blog, or one for an organization, use the resources below to gauge existing blogs and what topics they discuss. By researching other blogs, you can determine the most relevant topics for discussion, as well as how to differentiate your blog from others.

- Google Blog Search (http://blogsearch.google.com): Use this site for real-time search results on existing conversations among bloggers on a specific topic, such as mental and/or substance use disorders, prevention, treatment, or recovery. To develop a relationship with bloggers, read and comment on blog posts regularly. Pay particular attention to the blogger's latest posts so that a comment or response will be relevant.
- Blog Pulse (http://www.blogpulse.com): Use this site to create a graph that plots the number of online conversations taking place about a specific topic. This will help identify ways to positively contribute to the conversation.
- **Technorati (http://technorati.com):** Use this site to identify a blog's authority and influence. Technorati scores and rates blogs by calculating their influence. Start here to find the topics and bloggers who drive the conversation.

If you decide to start a personal blog, many websites, such as Wordpress (http://www.wordpress.com), Tumblr (https://www.tumblr.com), or Blogger (http://www.blogger.com), offer guidance. Once you begin to post, use sites such as Facebook or Twitter to cross-promote.

You can also practice blogger engagement to participate in existing conversations about your issue. Consider the following tips to help connect with others on message boards and blogs:

- **Be transparent.** Comment under your own name and share your background as it relates to the information posted.
- Comment on other people's blog posts. Let others know about the resources available to help them combat a mental and/or substance use disorder. Also, direct people to http://www.recoverymonth.gov.

Tips for starting an official Facebook page for your organization:

- Sign up and fill out your organization's information, including contact information.
- 2. Upload your organization's logo as the profile image.
- 3. Create a cover image for your page to showcase the mission of your organization.
- 4. Edit privacy settings.
- 5. Use the search bar to find friends or organizations on Facebook, and "like" them.
- 6. Update your status and post updates frequently to help grow your page.



• Offer resources and support. Prevention, treatment, and recovery services are sometimes offered online, and anonymous users may post messages about their own recovery journey. Respond with words of encouragement or helpful information and resources such as **Recovery Month's** inspirational quotes widget (http://www.recoverymonth.gov/Multimedia/Widgets-Landing-Page.aspx) or e-Cards (http://www.recoverymonth.gov/Home/ECards/ChooseDesign.aspx).

Engage on Facebook...

Since its launch in 2004, Facebook has developed into a worldwide social networking website with more than 950 million active members.¹ The site offers two ways to join: through a personal account or an official page account.

- To start a **personal account,** you will need to provide your name and email address. A personal Facebook page may feature contact information (if provided), interests, photos, and videos. You can determine the privacy settings to control what friends or other Facebook users can see.
- An **official page** is used to promote organizations, companies, or causes. These pages are entirely public, so non-Facebook users can view them as well.

Once an account is started:

- Find other Facebook members by using the search function, and "friend" or "like" any pages of interest.
- Share any resources or link to reputable sites that are helpful to those visiting your page, such as prevention, treatment, or recovery services in your local community.
- Create an "event" and send invites to friends to publicize a Recovery Month event.
 - o The invitation should include the location, the date and time, a brief description of the event, and any interesting or related links.
 - o Encourage participants to RSVP to the event through the "going," "maybe," or "not going" buttons.
 - o Consider creating an online event, such as a rally or a forum, and invite Facebook friends who are interested in **Recovery Month** to join and chat with others who actively promote prevention, treatment, and recovery.

Engage on Twitter...

Another popular social networking site is Twitter. This networking service allows "tweets," or text-based posts up to 140 characters long, to be displayed on a user's profile page. These tweets are publicly accessible unless you change the privacy settings. "Following" another Twitter account shows interest in what they tweet, and lays the groundwork for building a relationship. The site is easy to use and allows users to choose a Twitter username, write a short biography, and choose an account icon image. Below are some features of Twitter to help promote **Recovery Month.**

Use the **search function** and look up keywords related to **Recovery Month** or mental and/or substance use disorders to find conversations on the topic, or users who have related interests or messages. You can follow Twitter (http://www.twitter.com) users who have similar interests, retweet, and reply to their tweets when appropriate. This is a great way to gain followers and increase engagement.



- **Retweet** an interesting tweet to share the information with others. To do this, hit "Retweet" or add a "RT" in front of the text so other Twitter users realize that it is a retweet, and feel free to add commentary if you support the message. For example, "YourUserName: I'll take the pledge today! RT **@RecoveryMonth:** 2 for Me, 2 for You. Take our Pledge 4 Recovery Challenge and show your support for recovery!"
- Show support to Twitter users who post on a personal feed by **replying to their post**. This can be done by using an "@" symbol directly before a Twitter user's name. Also consider replying to a tweet by clicking "Reply," at the bottom of the tweet. By replying this way, you enable others to open the details of both the original tweet and any subsequent replies.
- Create or use a hashtag "#" with a key phrase to allow users to easily search and find a personal tweet using this key phrase. For example, using #RecoveryMonth will place a tweet into the discussion about Recovery Month.
- Send **direct messages**, or private tweets, to another Twitter user to communicate privately.
- Host a Twitter chat about a specific topic using a unique hashtag so that followers can participate in the conversation.
 Twitter chats are a great way to connect and interact with followers, increase the number of followers to a user's page, and promote *Recovery Month* messages. For instance, *Recovery Month* has hosted Twitter chats on topics including prevention and early intervention, recovery support services, and behavioral health care within the military community.

Twitter is an effective way to quickly inform followers or other users about general updates, events, or anything of interest to the behavioral health community. By bringing members together, online communities can serve as a support system. Be sure to start following **@RecoveryMonth** for information about upcoming events, personal stories of recovery, resources, and general conversation about the benefits of prevention, treatment, and recovery.

Join Other Social Media Outlets...

In addition to Facebook and Twitter, other social media applications can be used to successfully spread ideas and communicate the **Recovery Month** message through video, photo, and location-based communication. Below is a sample of these applications and how you can best use these tools.

- Use YouTube (http://www.youtube.com) to upload any videos that relate to positive messages surrounding **Recovery Month**, mental and/or substance use disorders, and the benefits of prevention, treatment, and recovery. To find others that share similar interests, subscribe to different channels and comment on enjoyable videos. When uploading videos, choose the right category and use detailed descriptions and tags so other users can easily find uploaded content. Also, remember to edit the properties for a video to allow all comments, require approval for each comment, or block all comments if needed.
- Use Flickr (http://www.flickr.com) to display images and videos of Recovery Month events. Tag and title them with specific keywords, such as an organization or event name, so they can be found easily by search engines. Join a Flickr group that has similar interests and comment on their discussion boards or photos. If one does not exist, create your own group and encourage others to contribute.

Be sure to check out the **Recovery Month** YouTube page (http://www.
youtube.com/user/recoverymonth) to
watch public service announcements
and other videos relating to prevention,
treatment, and recovery.



- Use Foursquare (http://www.foursquare.com) to "check in" and leave tips at **Recovery Month** event locations using applications on smartphones (e.g., iPhone, BlackBerry, Android, Palm) or mobile Internet. This updates other **Recovery Month** supporters about the specific location of an event, any networking opportunities in your community, or an experience you recommend for others.
- Use Google+ (https://plus.google.com) to organize connections in "Circles" to share specific information with certain groups of people or to host a virtual room live-stream or "Hangout" with up to 10 people at a time.
- Use Pinterest (http://pinterest.com), a virtual pinboard that allows users to share images found on the Internet to spread the message of recovery and treatment in a more visual manner. Connect with other users by posting and "repinning" images such as inspirational photos, motivational quotes, and relevant infographics. Organize photos by creating different pinboards and encourage other users to add to personal boards.
- Use Instagram (http://instagram.com) to quickly and easily share photos taken on a smartphone. Instagram is a mobile application that allows iPhone and Android users to easily filter and upload the photos they take and share them with friends and followers on Instagram, Facebook, or Twitter. Upload a photo from a **Recovery**Month event to Instagram in real time.

Additional Steps for Success...

There are many different ways to promote **Recovery Month** and local organizations through social media. Always remember when working with social media that nothing is ever deleted. Also, to keep friends or networks continually interested, be positive and keep posts or statuses timely, optimistic, and thought-provoking. If a friend on Facebook or a follower on Twitter is offensive, you can "defriend," stop following the person, or even block him or her from viewing your profile. If someone's actions are inappropriate or threatening, contact the respective social media network's administrator and file a report. Keep in mind the goal of spreading positive messages and promoting awareness of mental and substance use disorders, prevention, treatment, and recovery.

Continue to visit the **Recovery Month** website (http://www.recoverymonth.gov) to see what resources are available to help connect the recovery community online. **Recovery Month** shares a monthly digital media e-newsletter that shares case studies and tips of new trends and developments.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



Sources:

¹Facebook. (2012). Key Facts. Retrieved September 6, 2012, from http://newsroom.fb.com/content/default.aspx?NewsAreald=22.

Mental and Substance Use Disorders: Fast Facts

"At the end of most days, I can lay my head down and fall asleep knowing that I have given the world my best effort."

Jack McQueen Addiction Professionals Greenlawn, NY Health Prevention

Recovery

Education

join the voices for recovery

OPEN

On pathways to wellness



MENTAL AND SUBSTANCE USE DISORDERS: FAST FACTS

Each September during the National Recovery Month (Recovery Month) observance, the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov), releases the National Survey on Drug Use and Health. The survey is a prime source of information on the prevalence and impact of mental and substance use disorders across the country, as well as statistics that can add context to a **Recovery Month** event.

Sharing statistics and trends adds credibility and helps you achieve your goals for your event. In addition, members of the media are more likely to cover an event if there is information that supports mental and substance use disorders as a public health issue. State-specific statistics (http://www.samhsa.gov/data/NSDUH.aspx) are also a good way to illustrate the local impact of behavioral health conditions.

The following facts illustrate that behavioral health is essential to health, prevention works, treatment is effective, and people recover from these conditions. Included are facts about each audience – young adults, families and caregivers of young people, health care providers, and community leaders – referenced in this year's toolkit. This data national in focus and can be supplemented by researching local figures in your city or state.

Mental Illness...

- In 2011, 45.6 million U.S. adults aged 18 or older had a mental illness in the past year.¹
- In 2011, 31.6 million adults aged 18 or older reported receiving mental health services in the past year.²
- Serious mental illness is associated with an estimated total economic cost of \$317 billion per year.³
- In the United States, a person dies from suicide every 15 minutes.⁴

Substance Use Disorders...

- In 2011, 20.6 million people aged 12 or older were classified with substance dependence or abuse in the past year.⁵ In 2011, 19.3 million people aged 12 or older needed treatment for an illicit drug or alcohol use problem, but did not receive treatment at a specialty facility in the past year.⁶
- Substance use costs the country an estimated \$510 billion annually, including specialty alcohol and drug services, medical consequences, lost productivity due to death and illness, and injury or legal costs.⁷

Behavioral Health is Essential to Health...

- In 2011, eight million adults reported having co-occurring disorders, meaning they have both a mental and a substance use disorder.⁸
- Individuals with mental illnesses have increased risk for a number of physical health problems, including diabetes, cardiovascular disease, obesity, and smoking. Half of all lifetime cases of mental and substance use disorders begin by age 14 and three-fourths by age 24.12



 Untreated mental and substance use disorders lead to more deaths than traffic accidents, HIV/AIDS, and breast cancer combined.¹³

Behavioral Health and Insurance...

- Centers for Medicare and Medicaid Services (CMS) data show nearly one in four people with mental or substance
 use disorders lack health insurance. For those with both mental illness and substance use issues the figure is
 30 percent.¹⁴
- Open enrollment for the expansions in coverage under the Affordable Care Act (ACA) begins on October 1, 2013.
- SAMHSA is engaging in an aggressive communications effort that reaches the more than 11 million currently uninsured individuals with behavioral health needs.
- For help finding information on health insurance options, the Affordable Care Act, and information on prevention and wellness resources visit http://www.healthcare.gov.

Prevention Works...

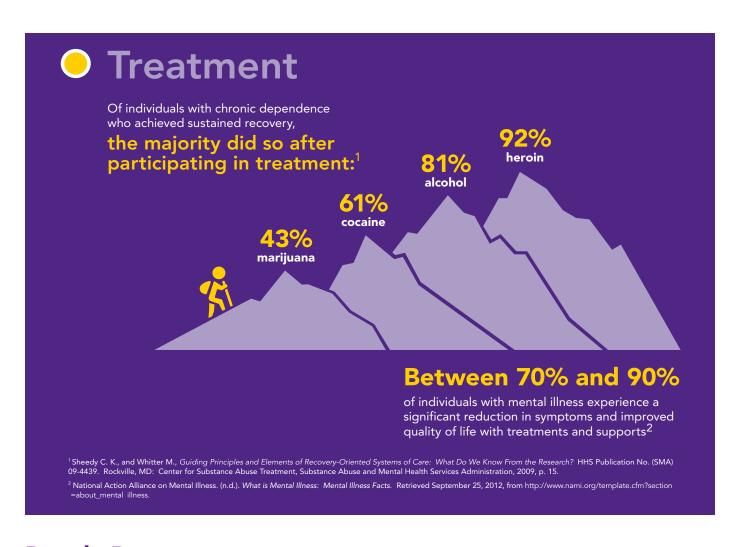
- The first symptoms typically precede a mental and/or substance use disorder by two to four years, offering a window of opportunity to intervene early and often.¹⁵
- Research shows that for every \$1.00 invested in prevention and early treatment programs, \$2.00 to \$10.00 could
 be saved in health costs, criminal and juvenile justice costs, educational costs, and lost productivity.¹⁶
- A well-implemented public awareness campaign raises cognizance of the signs and symptoms of mental disorders and risks for suicide.¹⁷
- In 2011, approximately 1 in 8 youths aged 12 to 17 reported that they had participated in drug, tobacco, or alcohol prevention programs outside of school in the past year.¹⁸
- In 2011, the prevalence of past month use of illicit drugs or marijuana was lower among those who reported having exposure to drug or alcohol prevention messages.¹⁹

Treatment is Effective...

- Scientific research shows that treatment can help patients addicted to drugs stop using, avoid relapse, and successfully recover their lives.²⁰
- Approximately 80 percent of patients with depressive disorders improve significantly with treatment and recovery support services.²¹







People Recover...

- Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.²²
- Approximately three-quarters of Americans believe that recovery is possible from addiction to substances such as alcohol, prescription drugs, and marijuana.²³
- Two-thirds of Americans believe that treatment and support can help people with mental illnesses lead normal lives.²⁴

People Affected...

- Health care providers:
 - The Diagnostic and Statistical Manual of Mental Disorders (DSM) classifies and describes more than 300 types of conditions, ranging from anorexia to schizophrenia.²⁵



o More than 80 percent of Americans had contact with a health care professional in the past year, placing these professionals in a unique position to screen, identify, and intervene early for a substance use" disorder. Additionally, doctors are able to prescribe medications and to identify abuse (or nonmedical use) of prescription drugs.²⁶

Young adults:

- o In 2011, the percentage of young adults 18 to 25 (29.8 percent) who had a mental illness was the highest among all adult age groups.²⁷
- o In 2011, the rate of substance dependence or abuse among adults aged 18 to 25 (18.6 percent) was higher than that among youths aged 12 to 17 (6.9 percent) and among adults aged 26 or older (6.3 percent).²⁸
- o In 2009, 30 percent of people aged 18 to 24 years and 28 percent of people aged 25 to 34 years were uninsured, compared to only 13 percent of people 35 years of age and older.²⁹
- Families and caregivers of young people:
 - o For youth aged 9 to 13, moms, dads, and grandparents are considered the most trusted sources of information.³⁰
 - o Youths aged 12 to 17 who believed their parents would strongly disapprove of their using substances were less likely to use that substance than were youths who believed their parents would somewhat disapprove or neither approve nor disapprove.³¹
 - o In 2011, 1.4 million youths (5.7 percent) had a past year major depressive episode with severe impairment in one or more role domains, such as doing chores at home, school, or work; relationships with family members or caregivers; or social life.³²

Community leaders:

- o From 2007 to 2010, 12.3 percent of people seeking treatment for illicit drug or alcohol abuse were deterred from treatment because they were concerned their community would have a negative opinion of them.³³
- o During the same time period, 8.0 percent of people were deterred from mental health services treatment because they were concerned their community would have a negative opinion of them.³⁴

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Sources:

Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 1.

²Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 1.

³Insel, T. (2008). Assessing the Economic Costs of Serious Mental Illness. American Journal of Psychiatry, 165(6), 663-665. Retrieved August 30, 2012, from http://ajp.psychiatryonline.org/data/Journals/AJP/3861/08aj0663.pdf.

⁴Centers for Disease Control and Prevention. (2009). Web-based Injury Statistics Query and Reporting System. Fatal Injury Data. Retrieved August 30, 2012, from http://www.cdc.gov/injury/wisqars/fatal.html.

Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 6.

*Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 6.

⁷Miller, T. and Hendrie, D. Substance Abuse Prevention Dollars and Cents: A Cost-Benefit Analysis, DHHS Pub. No. (SMA) 07-4298. Rockville, MD: Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration, 2008, p. 6.

⁸Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 1.

⁹Li, C., Ford, E.S., Zhao, G., Strine, T.W., Dhingra, S., Barker, L., Berry, J.T., & Mokdad, A.H. (2007). Association Between Diagnosed Diabetes and Serious Psychological Distress Among U.S. Adults: the Behavioral Risk Factor Surveillance System. *International Journal of Public Health*, 54(1), 43-51.

¹⁰Fan, A.Z., Strine, T.W., Jiles, R., & Mokdad, A.H. (2006). Depression and Anxiety Associated with Cardiovascular Disease among Persons Aged 45 Years and Older in 38 States of the United States. *Preventive Medicine*, 46(5), 445-540.

¹¹Stine, T.W., Mokdad, A.H., Dube, S.R., Balluz, L.S., Gonzalez, O., Berry, J.T., Maderscheid, R., & Kroenke, K. (2008). The Association of Depression and Anxiety with Obesity and Unhealthy Behaviors Among Community-Dwelling US adults. General Hospital Psychiatry, 30, 127-137.

¹²Kessler, R. C., Berglund, P., Demler, O., Jin, R., Merikangas, K. R., and Walters, E. E. (2005). Lifetime Prevalence and Age-of-Onset Distributions of DSM-IV Disorders in the National Comorbidity Survey Replication. *Archives of General Psychiatry*, 62(6), 593–602.

¹³Kochanek, K.D., Xu, J., Murphy, S.L., Minino, A.M., and Kung, H. (2011). Deaths: Preliminary Data for 2009. *National Vital Statistics Reports*, 59(4), 1-51. Retrieved August 30, 2012, from http://www.cdc.gov/nchs/data/nvsr/nvsr59/nvsr59_04.pdf.

¹⁴National Alliance on Mental Illness and National Council for Community Behavioral Healthcare. (2008). Coverage For All: Inclusion of Mental Illness and Substance Use Disorders in State Healthcare Reform Initiatives. Retrieved December 14, 2012, from http://www.nami.org/Template.cfm?Section=Issue_Spotlights&template=/ContentManagement/ContentDisplay.cfm&ContentID=119024.

¹⁵The National Academies. (2009). Preventing Mental, Emotional, and Behavioral Disorders Among Young People: Progress and Possibilities. Retrieved September 7, 2012, from http://www.bocyf.org/prevention_policymakers_brief.pdf, p. 1.

¹⁶Substance Abuse on Mental Services Administration. (2012). Justification of Estimates for Appropriations Committees. Retrieved October 22, 2012 from http://www.samhsa.gov/Budget/FY2012/SAMHSA-FY11CJ.pdf, p. 172.

¹⁷U.S. Department of Health and Human Services (HHS) Office of the Surgeon General and National Action Alliance for Suicide Prevention. 2012 National Strategy for Suicide Prevention: Goals and Objectives for Action. Washington, DC: HHS, September 2012, p.12.

¹⁸Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 70.

¹⁹Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 71.

²⁰U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). *Drugfacts: Treatment Approaches for Drug Addiction*. Retrieved September 25, 2012, from http://www.drugabuse.gov/publications/drugfacts/treatment-approaches-drug-addiction.

²¹Nordqvist, C. (2009). What is Mental Health? What is Mental Disorder? Medical News Today. Retrieved October 18, 2012, from http://www.medicalnewstoday.com/articles/154543.php.

²²SAMHSA Blog. (2011). SAMHSA's Definition and Guiding Principles of Recovery – Answering the Call for Feedback. Retrieved August 30, 2012, from http://blog.samhsa.gov/2011/12/22/samhsa%E2%80%99s-definition-and-guiding-principles-of-recovery-%E2%80%93-answering-the-call-for-feedback.

²³Substance Abuse and Mental Health Services Administration. (n.d.). Americans Believe in Prevention and Recovery From Addiction. CARAVAN Fact Sheet. Retrieved August 30, 2012, from http://www.samhsa.gov/Attitudes/CARAVAN_Factsheet.pdf, p. 2.

²⁴U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2006). National Mental Health Anti-Stigma Campaign: What a Difference a Friend Makes (SMA07-4257). Retrieved September 21, 2012, from http://www.samhsa.gov/MentalHealth/SMA07-4257.pdf, p. 3.

25 American Psychiatric Association. (2012). Diagnostic and Statistical Manual. Retrieved September 19, 2012, from http://www.psych.org/mainmenu/research/dsmiv.aspx.



²⁶U.S. Department of Health and Human Services, National Institute on Drug Abuse. (n.d.). Research Reports: Prescription Drugs. Retrieved September 25, 2012, from http://www.drugabuse.gov/publications/research-reports/prescription-drugs/preventing-recognizing-prescription-drug-abuse.

²⁷Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 9.

²⁸Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 77.

²⁷Demos and Young Invincibles. (2011). The State of Young America: The Databook. Retrieved December 12, 2012, from http://www.demos.org/publication/state-young-america-databook.

³⁰U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (n.d.). Too Smart to Start – Underage Alcohol Abuse Facts for Parents. Retrieved September 25, 2012, from http://www.toosmarttostart.samhsa.gov/families/facts/parents.aspx.

³¹Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 68.

²²Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 27.

³³Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 86.

³⁴Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 26.





NATIONAL RECOVERY MONTH CUSTOMER SATISFACTION FORM

The Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov) wants to know about your **National Recovery Month** (**Recovery Month**) efforts this September and year round. Use the below form to let us know how useful the **Recovery Month** toolkit materials were in building awareness about prevention, treatment, and recovery. This information will be used in the development of future materials distributed by SAMHSA, within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov).

While your response is voluntary, it is essential in order to improve future **Recovery Month** materials to better meet your needs. Please complete this form and return it by mail or fax to the address at the end of the form by December 31, 2013. SAMHSA encourages you to include photographs and/or samples of supporting materials from your **Recovery Month** activities.

This customer safisfaction form can also be found online at http://www.recoverymonth.gov.			
Name:	Title:		
Organization name & mailing address:	Phone & fax numbers:		
Organization website address:	Email address:		
Please provide a brief description of your event or major activities. (If sending in hard copy, please attach additional sheets, if necessary.)			
Did you receive media coverage? If yes, who co (Please include a brief summary or links to article			



Please tell us which kit materials listed below you used and provide suggestions for improving them.				
	Used It? (Y/N)	How Useful Was It?	Comments/Suggestions	
Mental and Substance Use Disorders: Fast Facts				
Develop Your Social Network				
Build Community Coalitions				
New Media Glossary				
Planning Partners				
Single-State Agency Directory: Prevention and Treatment of Mental and Substance Use Disorders				
Prevention, Treatment, and Recovery Resources				
Join the Voices for Recovery				
Promote Recovery Month With Events				
Work with the Media				
Press Materials for Your Recovery Month Event				
Share Your Voice Through Op-eds and Online Articles				
Issue Recovery Month Proclamations				
Recovery Month Public Service Announcements				
Banners, Letterhead, and Logos				
Targeted Outreach: Overview: Together on Pathways to Wellness				
Targeted Outreach: Health Care Providers				
Targeted Outreach: Young Adults				
Targeted Outreach: Community Leaders				
Targeted Outreach: Families and Caregivers of Young Adults				
Targeted Outreach: Treatment and Recovery				
Targeted Outreach: Common Mental Disorders and Misused Substances				
General Comments/Tonic Suggestions:		<u> </u>		

General Comments/Topic Suggestions:

Please send your response to: Consumer Affairs/Recovery Month

Center for Substance Abuse Treatment

1 Choke Cherry Road, Seventh Floor, Rockville, MD 20857

Fax: 240-276-2710

Thank you for sharing your **Recovery Month** story with us.

NOTE: Public reporting for this collection of information is estimated to average 10 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: SAMHSA Reports Clearance Officer, Paperwork Reduction Project (0930-0197), 1 Choke Cherry Road, Rockville, MD 20857. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0197 and the expiration date is 3/31/2014.

New Media Glossary

"After nearly losing my son to an illness, I've come to believe that those of us who survive such a family history have a special responsibility to break this wall of silence."

Victoria Costello

Author and Mental Health Advocate, Mental Health Mom Blog San Francisco, CA Education

Support

Help

Engagement

join the voices for recovery

oetles

on pathways to wellness





NEW MEDIA GLOSSARY

New media, also known as social media or digital media, facilitates online communication and content-sharing. These user-friendly web tools make it easy for people with similar interests to interact with each other.

Every year, **National Recovery Month (Recovery Month)** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov). The annual observance engages thousands of individuals within the recovery community and the prevention, treatment, and recovery support services fields, as well as local organizations.

To help you engage the online community and reach this year's target audiences (community leaders, health care providers, young adults, and families and caregivers of young adults), review the following glossary for background information on key online terms:

Blog: User-generated websites, short for "web log," which give online users an opportunity to share news or opinions on a particular subject, such as a person's success in achieving recovery or the hardships of untreated mental and/or substance use disorders. Blogs can be hosted on a variety of platforms. Some of the most popular include Wordpress (http://www.wordpress.com), Tumblr (https://www.tumblr.com), and Blogger (http://www.blogger.com).

Discussion Board (or Forum or Message Board): Conversations, or "threads," which are made up of multiple posts about specific topics. Recovery community discussion board communities include The Second Road (http://www.thesecondroad.org), The Sober Recovery Community (http://www.soberrecovery.com/forums), and In the Rooms (http://intherooms.com).

Facebook (http://www.facebook.com): A social networking site where people create an online profile and "friend" people or "like" organizations or campaigns to form an online network, as well as share interests, photos, and other information on a personal profile. Also consider joining *Recovery Month's* Facebook page (http://www.facebook.com/RecoveryMonth) to engage others in the ongoing dialogue. Below are some terms specifically related to Facebook that might help when navigating the site:

- **Event:** A page to post information about an event and send invites to friends or networks.
- Friend: An action that allows users to add other individuals to their overall network.
- **Like:** An action that shows interest in and support of an organization's page or status; "liking" an organization's page will then allow users to receive the organization's status updates in their feed and may allow the users to comment on the page.
- **News Feed:** A feature that shares status updates from friends and "liked" pages in real time. It also shares personal updates with others. A news feed can be sorted by "Most Recent" or "Top Stories." Users can also "comment" or "like" stories within their News Feed to show support.
- **Pages:** These help businesses, organizations, and brands share their stories and connect with people interested in their activities. Pages can be created and managed from a personal account.
- **Questions:** A feature that allows users to pose questions/polls to Facebook audiences for feedback and recommendations.



- **Share:** A feature that allows users to share status updates, photos, and videos posted on their timeline as well as content posted by a friend. Users can also choose who they would like to share content with.
- **Status:** A feature that allows users to display a short message of up to 420 characters. Statuses can describe a user's whereabouts and actions and can also be used to "share" photos, videos, events, news, and links.
- **Tag:** A designation for status updates and photos to link directly to another Facebook user's timeline or to an organization's page.
- **Timeline:** A collection of personal photos, stories, and experiences that help to tell your story throughout the years. Timeline allows users to upload a cover photo, add life events, and view highlights from each month.
- Wall: The space on a profile or page that allows friends and users to post messages for the network to see.

Flickr (http://www.flickr.com): A popular site for photo sharing, storage, and searching. Search for photos of other recovery events to post, get ideas from other events' visuals, or find members for your coalition. Also upload and share photos from a **Recovery Month** event.

Foursquare (https://foursquare.com): A location-based social application that allows users to "check-in" from locations using applications on smart phones (e.g., iPhone, BlackBerry, Android, Palm) or using mobile Internet. "Checking in" updates a location for other Foursquare users to see if anyone else on the network is at the same location or if there are any "tips" with recommendations to try or avoid particular things. People can check in at Recovery Month events (http://www.recoverymonth.gov/Community-Events.aspx) to indicate a large following.

Google+ (https://plus.google.com): A social networking site where people can create a profile and organize connections through "Circles." In a Google+ profile, users can share personal information, photos, videos, and events. Below are some terms specifically related to Google+ that might help when navigating the site:

- **Circles:** A feature that allows users to select and organize people into groups or "Circles" for optimal sharing, as well as the option to view content streams by "Circles." The default "Circles" include friends, family, acquaintances, and following. Circles also gather posts from people Google+ recommends based on a user's interests.
- Hangouts: Virtual rooms that allow a maximum of 10 people to participate in a single group facilitated video chat.
- **Sparks:** A search box that allows users to enter an interest to have Google+ pull related elements from the web to share with others, such as blog posts, videos, or books.

Google Blog Search (http://blogsearch.google.com): A tool that continuously collects and updates blog posts which can be viewed and filtered by relevance or date.

Instagram (http://instagram.com): A mobile application that allows iPhone and Android users to easily filter and upload the photos they take and share them with friends and followers on Instagram, Facebook, or Twitter. Consider using Instagram to upload photos from a **Recovery Month** event in real time.



Pinterest (http://pinterest.com): A virtual pinboard that allows users to organize and share items such as recipes, crafts, decorations, and other ideas with other users. Users can browse other users' pinboards for inspiration and new ideas. Below are some terms specifically related to Pinterest that might help when navigating the site.

- **Board:** A set of pins that a user wants to group together. Users can create a board on any topic with as many pins as desired.
- Following All: Shows all of a user's pins on all of their boards in real time, as well as any new boards the user creates.
- Like: Adds an image to a Pinterest profile's "likes" section, but it does not add the image to a personal board.
- Pin: An image that a user uploads to Pinterest or adds from a website using the "Pin It" button.
- **Repin:** When a user adds another person's image to their own board.

Podcast: A digital media file that can be downloaded through web syndication and played back on a mobile device or computer. **Recovery Month** offers a large selection of audio and video podcasts (http://www.recoverymonth.gov/Multimedia/Audio-and-Video-Podcasts.aspx) to promote on personal websites. A video podcast, or online delivery of a video clip, also can be referred to as a **vodcast**.

Really Simple Syndication (RSS) or Web Syndication: A feature that enables users to avoid constantly refreshing their favorite websites to check for updates. An RSS reader collects individual posts from blogs and news sites, and presents them as they arrive. Set up a feed to receive the latest news and blog posts from the recovery community directly to an inbox.

Social Network: An online gathering place that links individuals based on similar interests, beliefs, or relationships. Use these social networks to build a coalition that spans communities across the country. (See Facebook, Twitter, or Flickr.)

Twitter (http://www.twitter.com): A social media platform that allows its users to send text-based posts of a maximum of 140 characters to their profiles. These posts then appear on other Twitter members' home pages, who have subscribed to a user's feed. Follow **Recovery Month's** Twitter page and engage others in the ongoing dialogue. Search Twitter for other people who "tweet" about their **Recovery Month** events or treatment or recovery resources, or talk about their personal recovery experience. Below are some terms related to Twitter to help navigate the site:

- @: A symbol that when placed directly before a Twitter user's name directs a re-tweeted tweet to a specific person.
- **Direct messages:** Private tweets that can be sent between Twitter users. Both accounts must be following each other to send or receive a direct message. This is sometimes referred to as "DM." Direct messages cannot be longer than 140 characters.
- **Followers:** Twitter users who follow another user's tweets. Settings can be adjusted to only allow approved followers to see your updates.
- **Following:** A feature that allows subscription to other Twitter user's updates, which will appear on the Twitter home page.
- **Hashtag:** A feature that enables you to use the # (hashtag) symbol in front of a phrase or word so it can be easily grouped and found through a search of that keyword.



- **Reply:** A feature that allows you to click "Reply" at the bottom of the tweet to connect a post with an original tweet. By replying this way, others will be able to open the details of the tweet to view both the original tweet and any subsequent replies.
- **Re-tweet:** The act of re-posting another user's tweet on a personal account to share someone else's tweet with "followers," or add commentary on what was posted. "RT" is usually in front of the text if it is a re-tweet.
- **Trends:** The most common phrases appearing in tweets and a list of trending topics can be found on the sidebar.

Viral Marketing: Using the Internet to brand a campaign or product. **Recovery Month** uses Facebook, Twitter, and YouTube.

Widget: An online tool added to websites that displays or shares information from various sources. Instructions for adding the Recovery Month event or inspirational quotes widget to a blog or site are available at http://www.recoverymonth.gov.

Webcast: A file that streams over the Internet to allow people everywhere to tune in to a coalition-building meeting or event. **Recovery Month** presents the *Road to Recovery* Television and Radio Series (http://www.recoverymonth.gov/Multimedia.aspx) that features panels of nationwide experts in the field of treatment and recovery available for online viewing.

Wikipedia (http://www.wikipedia.org): A community-researched encyclopedia with more than 22 million entries and an estimated 365 million readers worldwide. The site is community-oriented, and anyone can update entries. Organizations are discouraged from editing their own entries, as it is considered a conflict of interest.

YouTube (http://www.youtube.com): A site that promotes online video-sharing and allows users to post videos they have created. Users create their own Channels that host all their videos and allow others to find them based on related interests. Check out **Recovery Month's** channel (http://www.youtube.com/user/recoverymonth) and SAMHSA's channel (http://www.youtube.com/user/SAMHSA) often.

- **Featured:** An optional tab that lets users pick from three templates to organize and display their videos to highlight the content that the Channel's audience will find most engaging.
- **Feed:** A tab that allows Channels to push content to subscribers even when there is not a video to share. This tab will include the latest activities, such as liking or commenting on a video, subscribing to a Channel, uploading a video, or adding a video to a playlist.
- **Playlists:** An organized collection of a Channel's uploaded videos and videos from other YouTube users. Playlists can be used to organize related videos, put together a sequence of videos, or to share lists with others.
- Tag: A word used to describe a video to help other users find a video when they search the site.
- **Videos:** The place where viewers can watch all of a Channel's uploaded videos. Choose to sort the videos by date or popularity.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.



PLANNING PARTNERS

The following organizations are partners involved in planning **National Recovery Month (Recovery Month)** activities in conjunction with Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), under the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov). You are encouraged to ask local and national organizations such as these to collaborate with your organization on **Recovery Month** planning; please refer to the "Build Community Coalitions" document for collaboration tips. To find affiliates or chapters in your local area, you can contact national organizations directly. A comprehensive list of mental and/or substance use disorder organizations are included in the "Prevention, Treatment, and Recovery Resources" section of this toolkit.

A&E Network

Inspired by the overwhelming response to its Emmy-nominated series Intervention, this television network created *The Recovery Project*, a multi-year campaign designed to generate widespread awareness that addiction is a treatable disease, and recovery is possible.

http://www.therecoveryproject.com

ACMHA – The College for Behavioral Health Leadership

This administration is focused on equipping behavioral health leaders for a field that is rapidly changing in extraordinary times. The membership is a diverse working network of influential leaders and emerging leaders from across systems. Members are concerned with mental health and substance abuse, representing public and private administrators of services; national, state and county government; professional organizations; managed behavioral health care organizations; research and academia; and consumer and family advocacy organizations.

505-822-5038

http://www.acmha.org

Addiction Survivors

This group is dedicated to providing online peer support communities for those with addiction, their families, and friends.

http://www.addictionsurvivors.org

Addiction Technology Transfer Center (ATTC) Network National Office

To advance public health and wellness, SAMHSA's ATTC Network accelerates lasting change in behavioral health care systems by translating, disseminating, and promoting the adoption and implementation of effective and culturally sensitive clinical practices. A list of ATTC Regional Centers, the states they serve, and contact information can be found on the ATTC Network website.

816-235-6888

http://www.ATTCnetwork.org

Adult Children of Alcoholics (ACA) World Service Organization (WSO)

This is a 12-step, 12-tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Members meet with each other in a mutually respectful, safe environment and acknowledge common experiences.

562-595-7831

http://www.adultchildren.org

Advocates for Recovery Through Medicine (ARM)

This organization's goals are to end discrimination against people who use medications to treat addictions and to move addiction treatment (especially opiate treatment) into mainstream medicine.

810-250-9064



Alcoholics Anonymous (AA)

This organization is a fellowship of men and women who share their experience, strength, and hope with each other that they may solve their common problem and help others to recover from alcoholism. It also provides support groups, sponsorship and a 12-step program for life without alcohol.

212-870-3400

http://www.aa.org

Alcoholism and Substance Abuse Providers of New York State (ASAPNY)

This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.

518-426-3122

http://www.asapnys.org

Alliance for Children and Families

This alliance provides services to the nonprofit child and family sectors and economic empowerment organizations.

414-359-1040

http://www.alliance1.org

American Association for Marriage and Family Therapy (AAMFT)

This association represents the professional interests of more than 25,000 marriage and family therapists throughout the United States, Canada, and abroad.

703-838-9808

http://www.aamft.org

American Association for the Treatment of Opioid Dependence (AATOD)

This group was founded in 1984 to enhance the quality of patient care in treatment programs by promoting the growth and development of comprehensive methadone treatment services throughout the United States.

212-566-5555

http://www.aatod.org

American Association of Pastoral Counselors (AAPC)

This group represents and sets professional standards for more than 3,000 pastoral counselors and 100 pastoral counseling centers in North America and around the world. It is non-sectarian and respects the spiritual commitments and religious traditions of those who seek assistance without imposing counselor beliefs onto the client.

703-385-6967

http://www.aapc.org

American Bar Association (ABA) Standing Committee on Substance Abuse

This committee promotes justice system reform that addresses problems associated with the illegal use of drugs and alcohol in this country. To carry out this mission, the Standing Committee collaborates with other ABA entities; federal, state, and local public/private organizations; and state, local, and territorial bar associations.

202-662-1000

http://www.abanet.org/subabuse

American Council for Drug Education (ACDE)

This council is a prevention and education agency that develops programs and materials based on the most current scientific research on drug use and its impact on society.

646-505-2061

http://www.acde.org

American Dental Association (ADA)

This group is the world's oldest and largest national dental society, representing more than 157,000 dentists throughout the United States. The ADA is committed to helping its members better identify, understand, and accommodate the special health care needs of patients with substance use disorders and facilitating the journey of recovery for dentists and their office staffs.

312-440-2500

http://www.ada.org



American Indian Community House, Inc. (AICH)

This organization educates the Native and non-Native public about the historical and contemporary contributions of Native Americans. AICH aims to protect, promote, improve, and enhance the health, education, and economic, social, and spiritual wellbeing of all Native Americans.

212-598-0100

http://www.aich.org

American Mental Health Counselors Association (AMHCA)

This association works exclusively for licensed mental health counselors by advocating for legislation that expands, enhances, and protects the right to practice, promotes mental health awareness, and builds the profession of mental health counseling nationally.

800-326-2642 703-548-6002

http://www.amhca.org

American Psychological Association (APA)

This organization is the largest scientific and professional organization representing psychology in the United States. Its membership includes more than 150,000 researchers, educators, clinicians, consultants, and students.

800-374-2721 202-336-5500

http://www.apa.org

American Public Human Services Administration (APHSA)

This administration pursues excellence in health and human services by supporting state and local agencies, informing policymakers, and working with our partners to drive innovative, integrated, and efficient solutions in policy and practice.

202-682-0100

http://www.aphsa.org

American Society of Addiction Medicine (ASAM)

This is an association of 3,000 physicians nationwide dedicated to improving the treatment of alcoholism and other addictions, educating physicians and medical students, promoting research and prevention, and enlightening and informing the medical community and the public about these issues.

301-656-3920

http://www.asam.org

Arab and Middle East Resources Center (AMERC)

This nonprofit organization was founded to provide inter-culturally sensitive services to raise awareness about mental and substance use disorders. This includes public awareness and recovery support. AMERC is a member of Michigan Community Coalition for Change (MC3), which has a mission of building bridges for recovery and well-being.

313-766-8712

ouramerc@yahoo.com

Association of Persons Affected by Addiction (APAA)

This nonprofit recovery community organization is designed to engage the faces and voices of the recovery community in reducing stigma. It provides peer-to-peer recovery community support services.

214-634-APAA (2722)

http://www.apaarecovery.org

Association of Recovery Schools (ARS)

This organization advocates for the promotion, strengthening, and expansion of secondary and post-secondary programs designed for students and families committed to achieving success in both education and recovery. ARS exists to support such schools which, as components of the recovery continuum of care, enroll students committed to being abstinent from alcohol and other drugs and working a program of recovery.

215-628-8600

http://www.recoveryschools.org



Beit T'Shuvah

This facility provides services to approximately 120 residents interact with clinical staff in a healing atmosphere that emphasizes faith-based recovery and the values of the Jewish community. The organization's goal is to reduce the incidence of addiction and other harmful behaviors through individual and family education.

310-204-5200

http://www.beittshuvah.org

Behavioral Health Services (BHS)

This nonprofit organization has provided a continuum of substance use, mental health, and senior services since 1973. Each of its 11 facilities (located throughout Los Angeles County) is based on its mission of transforming lives by offering hope and opportunities for recovery, wellness, and independence.

562-599-8444 ext. 4207

http://www.bhs-inc.org

Board of Cooperative Educational Services – Capital Region

This organization provides educational leadership, services, and support to meet the needs of our students and school districts in Albany, Schoharie, Schenectady, and Saratoga counties of New York State.

518-862-4900

http://www.capregboces.org

C4 Recovery Solutions, Inc.

This nonprofit organization was established to promote the design, provision, and monitoring of outcomes-based services that initiate and sustain recovery from substance use disorders, as well as improve prevention and harm reduction strategies that mitigate the effects of addiction.

http://www.c4recoverysolutions.org

California Association of Addiction Recovery Resources (CAARR)

This association educates and provides statewide recovery resources for alcoholics and people with addiction problems living in California.

916-338-9460

http://www.caarr.org

Capitol Decisions, Inc.

This full-service government relations and public affairs firm provides counsel in distinct issue areas, including state and local government, public works, health care, and public health.

202-638-0326

http://www.capitoldecisions.com

Caron Treatment Center

This center offers detoxification, gender-separate rehabilitation, relapse treatment, and extended care for adults and adolescents; educational programs for family members; and student assistance services.

800-854-6023

http://www.caron.org

Catholic Charities, USA

This membership association provides vital social services to people in need, regardless of their religious, social, or economic backgrounds.

703-549-1390

http://www.catholiccharitiesusa.org

Center for Alcohol and Drug Research and Education

This international nonprofit organization provides public information and technical assistance, guidance, information, and expert service to individuals, organizations, governmental agencies, and a variety of nonprofit organizations in the private sector to improve the quality of their response to substance use disorders.

410-377-8992



Chicanos Por La Causa, Inc.

This nonprofit community development organization offers social service programs and services throughout Arizona.

602-257-0700

http://www.cplc.org

Collaborative Support Programs of New Jersey, Inc. (CPNJ)

Institute for Wellness and Recovery Initiatives

This nonprofit, statewide agency organization is managed and operated by and for consumers of mental health services. It has four areas that provide a full range of services throughout New York and New Jersey: 1) community outreach and self-help center services; 2) supportive housing services and housing development; 3) supported employment; and 4) technical assistance/training focused on the Eight Dimension Wellness Model.

732-677-1682

http://www.cspnj.org http://www.welltacc.org

Communities of Tomorrow's Economic Development (CT)

This organization, in cooperation with industry players, associations, regional economic development authorities, and other stakeholders, aims to create economic development in the private sector. CT, based in Canada, focuses on the expansion of existing enterprises and the creation of new enterprises to drive economic growth and maximize return on investment in innovation. This organization works with communities in Saskatchewan, Canada.

306-522-6699

http://www.communitiesoftomorrow.ca

Community Anti-Drug Coalitions of America (CADCA)

This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.

800-542-2322

703-706-0560

http://www.cadca.org

Connecticut Turning to Youth and Families (CTYF)

This nonprofit organization was established to strengthen prevention, treatment, and recovery support services for youth and families. Using the power of youth and families with their own stories, this organization offers peer-to-peer programs and services that are natural recovery supports for other youth and families.

860-838-3553

http://www.ctyouthandfamilies.org/ctyf

Corporation for Supportive Housing (CSH)

This organization, established in 1991, advances its mission to help communities create permanent housing to prevent and end homelessness by providing advocacy, expertise, leadership, and financial resources to make it easier to create and operate supportive housing.

212-986-2966

http://www.csh.org

CRC Health Group

This group offers a comprehensive network of specialized behavioral care services in the nation, serving more than 30,000 people each day in 140 facilities, as well as providing healing and hope in the lives of patients, students, and families. For more than two decades, CRC programs have helped individuals and families reclaim and enrich their lives.

877-272-8668

http://www.crchealth.com



DC Bar - Lawyers Assistance Program

Established in 1985, this is a free and confidential program assisting lawyers, judges, and law students who experience problems that interfere with their personal lives or their ability to serve as counsel or officers of the court.

202-737-4700

http://www.dcbar.org/for_lawyers/bar_services/counseling/index.cfm

Drug Free America Foundation, Inc.

This foundation is a drug prevention and policy organization committed to developing, promoting, and sustaining global strategies, policies, and laws that will reduce illegal drug use, drug addiction, drug-related injury, and death.

727-828-0211

http://www.dfaf.org

Easy Does It, Inc. (EDI)

This group organizes committees that focus on a holistic approach to the process of personal growth within the recovery process.

610-373-2463

http://www.easydoesitinc.org

Elks Drug Awareness Resource Center

This program is the largest volunteer drug awareness program in the country. It is committed to eliminating the use of illegal drugs by all members of its society.

773-755-4700

http://www.elks.org

Employee Assistance Professionals Association, Inc. (EAPA)

This membership organization offers resources to employee assistance professionals.

703-387-1000

http://www.eapassn.org

Employee Health Programs (EHP)

This group, a subsidiary of First Advantage Corporation, designs and manages drug-free workplace programs, employee assistance programs, and other services that benefit employers and employees.

800-321-4473

http://www.ehp.com

Entertainment Industries Council, Inc. (EIC)

This nonprofit organization works within the film, television, and music industries to promote the accurate depiction of health and social issues in entertainment productions.

703-481-1414 (EIC East Coast) 818-840-2016 (EIC West Coast)

http://www.eiconline.org

Executive Office of the President (EOP) White House Office of Faith-Based and Neighborhood Partnerships

Located in seven federal agencies, this group's goal is to ensure that grassroots leaders can compete on an equal footing for federal dollars, receive greater private support, and face fewer bureaucratic barriers.

202-456-3394

http://www.whitehouse.gov/administration/eop/ofbnp

EOP, White House Office of National Drug Control Policy (ONDCP)

This component of the Executive Office of the President establishes policies, priorities, and objectives for the nation's drug control program, which includes prevention, treatment, and recovery.

202-395-6700

http://www.whitehouse.gov/ondcp



EOP, ONDCP

Information Clearinghouse

This federal office serves as a resource for statistics, research data, and referrals useful for developing and implementing drug policy.

800-666-3332

http://www.whitehousedrugpolicy.gov/about/clearingh.html

Faces & Voices of Recovery

This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, as well as their families, friends, and allies in campaigns to end discrimination and make recovery a reality for even more Americans.

202-737-0690

http://www.facesandvoicesofrecovery.org

Faith Partners

This organization promotes the prevention of alcohol, tobacco, and other drug abuse. It provides tools, training, materials, and assistance to congregations in several states.

512-394-9101

http://www.faith-partners.org

Foundation for Recovery

This group promotes the positive impact recovery has in the community and in the lives of individuals and families affected by mental and/or substance use disorders. Its programs, services, and partnerships open pathways for recovery by removing social barriers and creating opportunities for those seeking recovery.

702-257-8199

http://www.forrecovery.org

Foundations Recovery Network

This treatment and advocacy organization is dedicated solely to the treatment and recovery of people with co-occurring mental and substance use disorders. The agency has a full continuum of care, with locations in Memphis and Nashville, TN.

877-345-3357 615-345-3200

http://www.dualdiagnosis.org

Gaudenzia, Inc.

This group helps people affected by chemical dependency, mental illness, and related conditions to achieve a better quality of life – allowing them to live as productive and accountable individuals.

610-239-9600

http://www.gaudenzia.org

Georgetown University Health Policy Institute

This is a multi-disciplinary group of faculty and staff dedicated to conducting research on key issues in health policy and health services research. Institute members are engaged in diverse projects, focusing on issues relating to health care financing, the uninsured, federal health insurance reforms, quality of care and outcomes research, mental health services research, and the impact of changes in the health care market on providers and patients.

202-687-0880

http://ihcrp.georgetown.edu

George Washington University Ensuring Solutions to Alcohol Problems Initiative

This program works to increase access to treatment for individuals with alcohol problems by collaborating with policymakers, employers, and concerned citizens.

202-296-6922

http://sphhs.gwu.edu/institutescenters/ensuring_solutions_to_alcohol_problems.cfm



Grace Street Recovery Services

This organization provides mental health and addiction recovery services for individuals and families struggling with addiction.

207-312-4408

Health Matrix, Inc.

This organization develops communications programs that inform the debate on key issues in science, policy, and health care.

703-918-4930

http://www.healthmatrixinc.com

International Nurses Society on Addictions (IntNSA)

This is a professional specialty organization offering education and certification for nurses interested in the advancement of excellence in nursing care for the prevention and treatment of addictions for diverse populations across all practice settings through advocacy, collaboration, education, research, and policy development.

877-646-8672

http://www.intnsa.org

Jewish Alcoholics, Chemically Dependent Persons and Significant Others (JACS) / A Program of the Jewish Board of Family and Children Services (JBFCS)

This program's mission is to help both individuals and the Jewish community at large effectively treat and prevent addiction. JACS provides a supportive network of Jews who are successfully in recovery, as well as the communal professionals, clergy, and educators who help them. This organization is a resource center where individuals, families, groups, and community institutions can turn for helpful, comforting guidance.

212-632-4600

http://www.jbfcs.org/programs-services/jewish-community-services-2/jacs

Join Together

This resource is the result of a collaboration of the Boston University School of Public Health and The Partnership at Drugfree.org, which delivers substance abuse and addiction news that impacts the workplace, family, and community.

http://www.drugfree.org/join-together

Kansas Consumer Advisory Council for Adult Mental Health, Inc.

This is a consumer organization serving the geographical area of Kansas and dedicated to improving the lives of people with psychiatric disabilities. The organization is entirely made up of people who self-identify as current or former consumers of mental health services.

316-978-5842

http://www.kansascac.org

The Legal Action Center (LAC)

This nonprofit law and policy organization fights discrimination against people with histories of substance use disorders, HIV/AIDS, or criminal records, and advocates for sound public policies in these areas.

800-223-4044

212-243-1313

http://www.lac.org

LifeRing

This international nonprofit organization offers sober, secular self-help. Members rely on the strength of each individual and the influence of sober conversation to abstain from alcohol and drugs. People from all faiths, or none, are welcome, but those beliefs are private. This organization brings people together via face-to-face and online support groups, and provides sobriety tools through original books, publications, and interactive online resources.

800-811-4142

http://www.lifering.org



Massachusetts Organization for Addiction Recovery (MOAR)

This organization, located in Massachusetts, is a collective voice of people in recovery, families, and friends who are helping each other educate the public about the value of living in recovery and the resources to support recovery. MOAR supports communities across Massachusetts.

617-423-6627

http://www.moar-recovery.org

The McShin Foundation

This foundation is Virginia's fastest growing peer-topeer recovery community organization. Founded in 2004, this is a nonprofit organization committed to serving individuals and families in their fight against substance use disorders.

804-249-1845

http://www.mcshin.org

Mental Health America (MHA)

This organization is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With nearly 300 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service.

800-969-6642 703-684-7722

http://www.mentalhealthamerica.net http://www.mentalhealthamerica.net/go/recovery

Minnesota Recovery Connection (MRC)

This organization's mission is to strengthen the recovery community through peer-to-peer support, public education, and advocacy. MRC envisions a world where recovery from addiction to alcohol and other drugs is understood, promoted, embraced, and enjoyed and where all who seek it have access to the support, care, and resources they need to achieve long-term recovery. This organization assists people seeking treatment, transportation, housing, job training, education, health, or other pathways to recovery.

651-233-2080

MusiCares

This program provides a safety net of critical assistance for people in times of need. Its services and resources cover a wide range of financial, medical, and personal topics. It also focuses the resources and attention of the music industry on human service issues that directly impact the health and welfare of the music community.

310-392-3777 (West Region) 212-245-7840 (East Region) 615-327-0050 (South Region) http://www.musicares.com

NAADAC, The Association for Addiction Professionals

This is a national nonprofit membership organization, with over 52 affiliates across the United States, American territories, and internationally. It focuses on empowering addiction professionals to achieve excellence through education, advocacy, knowledge, standards of practice, ethics, and professional development and research.

800-548-0497 703-741-7686

http://www.naadac.org

NALGAP: The Association of Lesbian, Gay, Bisexual, Transgender Addiction Professionals and Their Allies

This membership organization was founded in 1979 and is dedicated to the prevention and treatment of alcoholism, substance abuse, and other addictions in lesbian, gay, bisexual, transgender, and queer communities.

http://www.nalgap.org

Nar-Anon

This is a 12-step program designed to help relatives and friends of addicts recover from the effects of living with an addicted relative or friend. The program uses Nar-Anon's 12 Steps and 12 Traditions.

800-477-6291 310-534-8188

http://www.nar-anon.org



Narconon

This is a nonprofit drug rehab program dedicated to eliminating drug abuse and drug addiction through drug prevention, education, and rehabilitation.

800-775-8750 323-962-2404

http://www.narconon.org

Narconon Arrowhead

This group is located in Oklahoma and is part of the larger Narconon International group. It uses a full approach to treatment and recovery by teaching participants how to live a drug-free life.

800-468-6933

http://www.stopaddiction.com

Narcotics Anonymous (NA)

This organization is a global, community-based organization with a multi-lingual and multicultural membership. It offers recovery from the effects of addiction through working a 12-step program, including regular attendance at group meetings. The group atmosphere provides help from peers and offers an ongoing support network for addicts who wish to pursue and maintain a drug-free lifestyle.

818-773-9999

http://www.na.org

National Alliance for Medication Assisted Recovery (NAMA Recovery)

This is a membership organization representing people whose recovery from opiate dependence is assisted with medication. Its membership includes methadone patients, family members, and health care professionals whose common goal is to fight the ignorance and prejudice surrounding medication-assisted recovery.

212-595-NAMA (6262)

http://www.methadone.org

National Alliance of Advocates for Buprenorphine Treatment (NAABT)

This nonprofit organization has the mission to educate the public about the disease of opioid addiction and the buprenorphine treatment option to help reduce discrimination associated with patients with addiction disorders and to serve as a conduit for connecting patients in need of treatment to qualified treatment providers.

860-269-4390

http://www.naabt.org

National Alliance to End Homelessness

This is a nationwide coalition of public, private, and nonprofit organizations devoted to ending homelessness.

202-638-1526

http://www.endhomelessness.org

National Asian Pacific American Families Against Substance Abuse, Inc. (NAPAFASA)

This private, nonprofit membership organization involves service providers, families, and youth to promote health and social justice and address the alcohol, tobacco, and other drug issues of Asian and Pacific Islander populations.

213-625-5795

http://www.napafasa.org

National Association for Children of Alcoholics (NACoA)

This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. This organization provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.

888-554-COAS (2627)

301-468-0985

http://www.nacoa.org



National Association of Addiction Treatment Providers (NAATP)

This association represents private addiction treatment programs throughout the United States.

717-392-8480

http://www.naatp.org

National Association of County Behavioral Health and Developmental Disability Directors (NACBHD)

This nonprofit membership organization is comprised of county and local behavioral health authorities who plan and deliver mental health, developmental disability, and substance use disorder services, as well as the state associations that represent their interests.

202-661-8816

http://www.nacbhd.org

National Association of Drug Court Professionals (NADCP)

This association seeks to reduce substance use, crime, and recidivism by promoting and advocating for the establishment and funding of drug courts and providing for the collection and dissemination of information, technical assistance, and mutual support to association members.

703-575-9400

http://www.nadcp.org

National Association of Public Child Welfare Administrators (NAPCWA)

This association is devoted solely to representing administrators of state and local public child welfare agencies, bringing an informed view of the problems facing families today to the formulation of child welfare policy.

202-682-0100

http://www.aphsa.org/napcwa

National Association of Social Workers (NASW)

As the largest membership organization of professional social workers in the world, this organization works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies.

202-408-8600

http://www.socialworkers.org

National Association of State Alcohol and Drug Abuse Directors (NASADAD)

This private, nonprofit educational, scientific, and informational association supports the development of effective prevention and treatment programs throughout every state.

202-293-0090

http://www.nasadad.org

National Association on Alcohol, Drugs and Disability, Inc. (NAADD)

This association promotes awareness and education about substance use disorders among people with physical, sensory, cognitive, and developmental disabilities.

650-578-8047

http://www.naadd.org

National Center on Addiction and Substance Abuse at Columbia University (CASA)

This organization is the only nationwide entity that brings together all the professional disciplines needed to study and combat the abuse of all substances – alcohol, nicotine as well as illegal, prescription, and performance-enhancing drugs – in all sectors of society.

212-841-5200

http://www.casacolumbia.org



National Civic League (NCL)

This nonprofit, nonpartisan membership organization is dedicated to strengthening citizen democracy by transforming democratic institutions. It fosters innovative community building and political reform, assists local governments, and recognizes collaborative community achievement.

303-571-4343

http://www.ncl.org

National Coalition for Mental Health Recovery (NCMHR)

This coalition ensures that consumers/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the state and national levels, empowering people to recover and lead a full life in the community.

877-246-9058

http://www.ncmhr.org

National Conference of State Legislatures (NCSL)

This is a bipartisan organization that serves the legislators and staffs of the nation's 50 states, its commonwealths, and territories. It provides research, technical assistance, and opportunities for policymakers to exchange ideas on the most pressing state issues.

202-624-5400

http://www.ncsl.org

National Council for Community Behavioral Healthcare

This organization is the national association of community providers who together care for six million adults and children across the country who suffer from mental illnesses, developmental disabilities, and substance use disorders. Its members employ more than 250,000 staff and provide mental health and substance use treatment, rehabilitation, housing, and community support services.

202-684-7457

http://www.thenationalcouncil.org

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)

Founded in 1944, this voluntary health organization and its National Network of Affiliates is dedicated to fighting alcoholism, drug addiction, and the devastating consequences of alcohol and other drugs on individuals, families, and communities. NCADD focuses on increasing public awareness and understanding of the disease of alcoholism and drug dependence through education, prevention, information and referral, intervention, treatment services, advocacy, and recovery support services. It has helped millions of individuals and family members into recovery.

800-NCA-CALL (622-2255) (Hope Line) 212-269-7797

http://www.ncadd.org

National Council on Alcoholism and Drug Dependence – Greater Detroit Area (NCADD-GDA)

This council provides effective alcohol and drug abuse intervention, prevention, and treatment services to children and adults with substance use disorders in the Detroit area.

313-868-1340

http://www.ncadd-detroit.org

National Council on Patient Information and Education (NCPIE)

This multi-disciplinary coalition works together to stimulate and improve communication of information on safe and appropriate medicine use to consumers and health care professionals.

301-340-3940

http://www.talkaboutrx.org

National Drug Court Institute (NDCI)

This institute promotes education, research, and scholarship for drug court and other court-based intervention programs.

703-575-9400

http://www.ndci.org



National Governor's Association (NGA)

This bipartisan organization of the nation's governors promotes visionary state leadership, shares best practices, and speaks with a collective voice on national policy.

202-624-5300

http://www.nga.org

National Inhalant Prevention Coalition (NIPC)

This public-private effort promotes awareness and recognition of the under-publicized problem of inhalant use. The coalition serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a weeklong national grassroots education and awareness campaign.

800-269-4237 423-265-4662

http://www.inhalants.org

National Organization on Fetal Alcohol Syndrome (NOFAS)

This organization provides education and awareness about the prevention of birth defects caused by alcohol consumption during pregnancy.

202-785-4585

http://www.nofas.org

National Rural Alcohol and Drug Abuse Network, Inc. (NRADAN)

This private, nonprofit foundation promotes networking between rural programs and professionals along with providing liaisons to key federal and state government agencies and private resources.

715-232-2793

http://www.uwstout.edu/outreach/nri

National Safety Council (NSC)

This council is a nonprofit public service organization dedicated to educating and influencing people to prevent accidental injuries and deaths.

800-621-7615

http://www.nsc.org

Network for the Improvement of Addiction Treatment (NIATx)

This network is a partnership between the Robert Wood Johnson Foundation's Paths to Recovery program, the Center for Substance Abuse Treatment's Strengthening Treatment Access and Retention (STAR) program, the National Institute on Drug Abuse, and a number of independent addiction treatment organizations. It works with addiction treatment providers to make more efficient use of their capacity and shares strategies for improving treatment access and retention.

608-265-0063

http://www.niatx.net

Newport Academy

This treatment center is dedicated to providing comprehensive, gender-specific, integrated treatment programs for adolescent males and females in an environment of caring and compassion by which teens and their families may recover from the destructive effects of substance use disorders and related behavioral health issues. It offers separate residential facilities and has an active after-school program in Orange County, CA.

866-382-6651

http://www.newport-academy.com



New York City Department of Health and Mental Hygiene (NYCDOHMH)

Office of Consumer Affairs (OCA)

This office responds directly to New York State's consumers' needs in three distinct disability areas: mental health, mental retardation/developmental disabilities, and chemical dependency. The office has a dual mission: to ensure that consumer voice and perspectives are heard and integrated at all levels and to empower consumers through education and exposure to resources.

212-219-5393

http://www.nyc.gov/portal/site/nycgov/menuitem.9ccf2 4b9bedd2ae6a62fa24601c789a0

New York State Office of Alcoholism and Substance Abuse Services (OASAS)

This organization works to improve the lives of residents of New York by leading a system of addiction services through prevention, treatment, and recovery.

518-473-3460

http://www.oasas.ny.gov/

North Carolina Department of Health and Human Services

Division of Mental Health Developmental Disabilities and Substance Abuse (DMH/DD/SAS)

This office is primarily responsible for leadership, guidance, and management of relationships with the local management entities who contract directly for addiction treatment services. It also collaborates with a wide variety of public and private partners and customers to promote recovery through the adoption of recovery-oriented systems of care and the promotion of a reduction to barriers to services.

919-733-4534

http://www.dhhs.state.nc.us/MHDDSAS

Northern Ohio Recovery Association (NORA)

This project provides faith-based recovery support services across Cuyahoga, Lorain, and Summit counties.

216-391-6672

http://www.norainc.org

Odyssey Networks

This network is the nation's largest coalition of Christian, Jewish, and Muslim faith groups dedicated to achieving interfaith understanding through the production and distribution of media.

212-870-2200

http://www.odysseynetworks.org

Oxford House, Inc.

This is the umbrella organization for a network of more than 1,200 democratically-run, self-supporting, and drug-free group homes throughout the country.

800-689-6411 301-587-2916

http://www.oxfordhouse.org

The Partnership at Drugfree.org

This nonprofit organization helps parents prevent, intervene in, and find treatment for drug and alcohol use by their children. Bringing together renowned scientists, parent experts, and communications professionals, this public health nonprofit translates current research on teen behavior, parenting, addiction, and treatment into easy-to-understand resources. The organization also reaches families through its community education programs, which focus on local drug and alcohol issues of concern for parents, youth, and the Hispanic community.

212-922-1560

http://www.drugfree.org

Partnership for Recovery (PFR)

This coalition includes the Betty Ford Center, Bradford Health Systems, Cumberland Heights, Father Martin's Ashley, Gateway Rehabilitation Center, Hazelden Foundation, Valley Hope Association, and the National Association of Addiction Treatment Providers.

202-737-8167

http://www.partnershipforrecovery.org



Pennsylvania Department of Health Department of Drug and Alcohol Programs (DDAP)

This state government agency develops and implements a comprehensive health, education, and rehabilitation program for the prevention, intervention, treatment, and case management of substance use disorders.

717-783-8200

http://www.health.state.pa.us/bdap

Phoenix House

This nonprofit organization serves individuals throughout the country who are struggling with mental and/or substance use disorders. This organization provides residential and outpatient treatment along with prevention and recovery support services.

800-378-4435

http://www.phoenixhouse.org

Portland State University Graduate School of Social Work

This program offers the only graduate social work education programs in Oregon accredited by the Council on Social Work Education. The school's three major functions are teaching, research, and community service.

503-725-4712

http://www.ssw.pdx.edu

Prevention Partnership International (PPI) – Family Resources International

This is a division of Family Resources International, a 501c3 nonprofit agency. The partnership develops programs that provide resources for children and families to break the cycle of addiction. 408-406-0467

http://www.preventionpartnership.us

PRO-ACT

This grassroots recovery support initiative in southeastern Pennsylvania (Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties) has provided prevention, intervention, and recovery support services, as well as education and advocacy, to the community for 11 years. It provides a growing matrix of peer-to-peer support services, which has led to the opening of three recovery community centers, now a hub for all recovery services.

800-221-6333

http://www.proact.org

The Providence Center

This organization is the largest community behavioral health center in Rhode Island providing comprehensive services to adults, adolescents, and children experiencing mental health, substance use, emotional, and behavioral difficulties.

401-528-0123

http://www.providencecenter.org

Psychology Today

This organization is dedicated to helping people understand their addiction, the issues behind it, and how to overcome the challenge.

212-260-7210

http://www.psychologytoday.com

The RASE Project

This project in south central Pennsylvania provides recovery support services, events, training and education, supportive housing, and intervention services. This project also offers the Buprenorphine Coordinator Program, providing recovery support for those in medication-assisted treatment for opioid addiction.

717-232-8535

http://www.raseproject.org



Reach Out Recovery/Rehab Productions

This organization's goal is to help lift the stigma of addiction and carry the message of hope for recovery to restore lives of everyone affected by addiction and positively impact communities worldwide.

http://reachoutrecovery.com

Reality House

Established in 1967, this organization provides culturally-appropriate substance abuse and HIV treatment and prevention services to New Yorkers. The facilities consist of a 30-bed veteran's residence and a medically supervised outpatient chemical dependency treatment program.

212-281-6004

http://www.realityhouseny.org

Reclaiming Futures

This initiative created by the Robert Wood Johnson Foundation (RWJF), housed in the Regional Research Institute, School of Social Work at Portland State University, offers a proven approach to helping teenagers caught in the cycle of drugs, alcohol, and crime. In 37 communities across the nation, the program has received investments from RWJF, the Office of Juvenile Justice and Delinquency Prevention, SAMHSA's Center for Substance Abuse Treatment, the Kate B. Reynolds Charitable Trust, and the Duke Endowment.

503-725-8911

www.reclaimingfutures.org

Recovering Your Body

An organization that promotes the awareness of the benefits of fitness, nutrition, athletics, and energy healing in the recovery process through a website, articles, videos and, with the help of others, concrete programs.

914-478-5048

http://www.recoveringyourbody.com

Recovery Alliance of El Paso

The alliance was organized in 1998 to fight discrimination for people in recovery from substance use disorders and is now dedicated to providing peer-to-peer recovery support services.

866-535-7276

915-594-7000

http://www.recoveryalliance.net

Recovery Connection

This is a comprehensive addiction treatment resource and drug rehabilitation referral service. The organization has staff across the country available 24 hours a day to answer all concerns about substance use, addiction treatment, and rehabilitation.

800-993-3869

954-491-1771

http://www.recoveryconnection.org

Recovery Consultants of Atlanta, Inc. (RCA)

This is a nonprofit, faith-based organization founded by concerned, committed, and spiritually centered members of metro Atlanta's recovery community. It collaborates with faith (primarily churches) and community-based organizations, develops peer-to-peer support services and programs, and works to build a network of recovering individuals.

404-289-0313

http://www.recoveryconsultants.org



Recovery Living Network

This global communications network focuses on addiction recovery and prevention, using the power of personal experience, celebrity influence, and mass media communication to help individuals when alcohol, drugs, or other excessive behaviors have become a problem in their lives. Its mission is to remove misconceptions from the public psyche to change the perception and image of addiction by talking about it openly and honestly, and by sharing personal stories of hope and inspiration.

310-315-4727

http://www.recoveryliving.com

Recovery Network, Inc.

This organization provides peer-based support and recovery services that use evidence-based methods to empower consumers with their recovery efforts and assist them through partnership with community organizations to become self-sufficient members of society.

517-543-2312

RecoveryNC

Initiated in September 2008 to coincide with the celebration of **Recovery Month**, this campaign allows North Carolinians in recovery to emerge together, along with their families, friends, advocates, and the treatment and recovery provider community.

919-802-7972

http://www.recoverync.org

ReNew Media, LLC

This is a multi-media company that serves the addiction recovery community. Currently, the company delivers its content through various digital and print means, including its website, http://reneweveryday.com, mobile applications, social media and its national print magazine, *Renew*.

773-883-4474

http://www.reneweveryday.com

ReStart, Inc.

This nationally accredited, full-service behavioral health care provider offers a wide range of diagnostic and treatment services tailored to meet individual needs, including community support services for adults, children, and adolescents. It offers diagnostic assessments, child and adult therapy, family and group sessions, assessments and counseling, residential treatment for girls, behavioral therapy, assertive community treatment teams, psychological evaluations, intensive in-home services, and community support teams.

252-355-4725

http://www.restarthumanservices.com

Rhode Island Department of Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH)

This organization is committed to assuring access to quality services and supports for Rhode Islanders with developmental disabilities, mental health and substance abuse issues, and chronic long term medical and psychiatric conditions.

401-462-2339

http://www.bhddh.ri.gov

ROCKSTAR SUPERSTAR PROJECT (RSSS)

In a culture pervasive with messaging and branding that encourages risky behavior, twin brothers who legally changed their names to *Rock Star* and *Super Star* are on a mission to rebrand sobriety, inspiring responsible choices and dream catching. RSSS inspires teens to make responsible choices and go boldly towards their dreams.

http://www.rockstarsuperstarproject.com

Sagebrush

This holistic residential treatment center for adults provides a small, individualized clinical program to give an ideal recovery environment where one can focus on mental, physical, and spiritual well-being.

888-406-7444

http://www.sagebrushva.com



The Second Road, Inc.

This is a 24-hour web-based nonprofit group to help those in recovery (and the families of those affected by addiction) learn to live with the challenges presented by everyday life and continue on a fulfilling road of recovery. The site offers a community of trust and understanding, inspiring stories from people of diverse cultures and backgrounds, the knowledge of many experts in the addiction treatment field, and the tools to resist relapse in a secure, non-threatening environment.

SMART Recovery®

This international nonprofit organization offers free, self-empowering, science-based mutual help groups for abstaining from any substance or activity addiction. SMART stands for Self Management and Recovery Training. The SMART Recovery 4-Point Program® helps people recover from all types of addictive behaviors, including alcohol, drugs, substance abuse, gambling addiction, and addiction to other substances and activities.

866-951-5357 440-951-5357

http://www.smartrecovery.org

Sobriety Television

This is a YouTube channel with videos about addiction and recovery, as well as stories of recovery, the 12 steps, addiction topics, independent films, and more.

http://youtube.com/sobrietytelevision

State Associations of Addiction Services (SAAS)

This is the national organization of state provider associations representing treatment and prevention programs for substance use disorders.

202-546-4600

http://www.saasnet.org

Steppin' Out Radio

The goal of this one-of-a-kind radio show is to produce powerful radio broadcasts and provide an outlet for participants in 12-step meetings to share their stories.

845-359-3299

http://www.steppinoutradio.com

Stepping Stone of San Diego

This group provides treatment and recovery services focusing on San Diego's lesbian, gay, bisexual, and transgender communities.

619-278-0777

http://www.steppingstonesd.org

Substance Abuse and Addiction Recovery Alliance (SAARA)

This is a community-based grassroots membership organization of individuals in recovery from substance use disorders, their families, friends, and committed community supporters across Virginia.

804-762-4445

http://www.saara.org

Suicide Prevention Resource Center (SPRC) Education Development Center, Inc.

This center provides prevention support, training, and resources to assist organizations and individuals to develop suicide prevention programs, interventions, and policies, and to advance the National Strategy for Suicide Prevention.

800-273-8255 (National Suicide Prevention Lifeline) 877-438-7772

617-964-5448

http://www.sprc.org

Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF)

This is a nonprofit organization focused on support for prevention and treatment in Africa from alcohol and other drug problems, serving as a resource to improve the well-being of individuals, families, and communities.

609-466-8101

http://www.sapta.or.ke/home



The T.A. Libby Group

This group provides addiction science education and recovery advocacy through published work, continuing education workshops, conference presentations, and visibility events.

443-822-6791

http://www.talibby.com

Talk Therapy Television, Inc.

This private, nonprofit organization produces and broadcasts weekly television programming dedicated to promoting behavioral health awareness, treatment, and recovery. This organization promotes creative and innovative ideas that generate public dialogue and discussion, and reduce the stigma associated with these disorders.

631-780-2807

http://www.talktherapytv.org

TASC, Inc. of Illinois

This is a statewide, nonprofit organization that links courts and prisons to community-based alcohol and drug treatment and recovery support.

312-787-0208

http://www.tasc.org

Teen Challenge International, USA

This network of 240 centers throughout the United States (and in 82 nations) provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems. The network's training centers are 8- to 14-month comprehensive residential recovery programs that deal with drug and alcohol addictions, offered at minimal cost to participants.

417-581-2181

http://www.teenchallengeusa.com

Texas Department of State Health Services (DSHS) Community Mental Health and Substance Abuse Services (MHSA)

This department works to improve health and well-being of people living in Texas. The department built an extensive research and reference collection in the area of substance abuse prevention and treatment, which is available online.

512-206-5000

http://www.dshs.state.tx.us/default.shtm

Therapeutic Communities of America (TCA)

This national nonprofit membership association represents more than 650 substance use and mental health treatment programs that provide a variety of services to substance use and co-occurring disorder clients with a range of special needs.

202-296-3503

http://www.therapeuticcommunitiesofamerica.org

Turning Point

This organization has served the Minnesota community since 1976, providing African Americans with a holistic approach to counseling and treatment.

612-520-4004

http://www.ourturningpoint.org

Two Dreams Outer Banks

This is a comprehensive wellness program that provides individualized care for those who dream of recovering a healthy lifestyle. The facility is located on the Outer Banks of North Carolina and customizes an array of treatment components, therapeutic services, and recreational activities to help its guests achieve emotional peace, physical health, and personal productivity.

877-355-DREAM (3732)

http://www.twodreamsouterbanks.com



U.S. Agency for International Development (USAID)

This independent federal government agency receives overall foreign policy guidance from the Secretary of State. The agency supports long-term and equitable economic growth and advances U.S. foreign policy objectives by supporting economic growth, agriculture and trade; global health; and democracy, conflict prevention, and humanitarian assistance.

202-712-4810

http://www.usaid.gov

U.S. Department of Defense (DOD)

This federal agency provides a wide array of services to prevent substance use disorders, including worksite education, drug testing, early intervention, outpatient counseling, and inpatient treatment.

703-571-3343

http://www.defenselink.mil

U.S. Department of Health and Human Services (HHS)

This federal government agency protects the health of all Americans and provides essential human services, especially for those who are least able to help themselves.

877-696-6775

http://www.hhs.gov

HHS, Food and Drug Administration (FDA)

This government agency is responsible for protecting the public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines, and other biological products; medical devices; our nation's food supply; cosmetics; dietary supplements; and products that give off radiation.

800-216-7331 301-575-0156

http://www.fda.gov

HHS, Health Resources and Services Administration (HRSA) Poison Control Program

This program oversees the national toll-free Poison Help Line, 1-800-222-1222, which connects callers to their nearest poison center, 24 hours a day, 7 days a week for help in a poisoning emergency. Calls are free and confidential and can be translated into 161 languages.

800-222-1222

http://www.poisonhelp.hrsa.gov

HHS, National Institutes of Health (NIH) National Institute on Alcohol Abuse and Alcoholism (NIAAA)

This federal institute provides leadership in the national effort to reduce alcohol-related problems and promote recovery by conducting and supporting research in a wide range of scientific areas.

301-443-3860

http://www.niaaa.nih.gov

HHS, National Institutes of Health (NIH) National Institute on Drug Abuse (NIDA)

This federal institute supports most of the world's research on the health aspects of drug abuse and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.

301-443-1124

http://www.drugabuse.gov



HHS, Substance Abuse and Mental Health Services Administration (SAMHSA)

This federal agency improves the quality and availability of prevention, treatment, and rehabilitative services to reduce illness, death, disability, and cost to society resulting from mental and/or substance use disorders. It lists a range of resources on its "Find Substance Abuse and Mental Health Treatment" website, http://www.samhsa.gov/treatment/index.aspx.

800-662-HELP (4357) (SAMHSA's National Helpline) 877-SAMHSA-7 (726-4727) (Information and materials) 240-276-2130

http://www.samhsa.gov

HHS, SAMHSA

Center for Mental Health Services (CMHS)

As a sponsor of **Recovery Month**, this federal center seeks to improve the availability and accessibility of high-quality community-based services for people with or at risk for mental illnesses and their families. It collects, analyzes, and disseminates national data on mental health services designed to help inform future services policy and program decision-making.

800-789-2647 240-276-1310

http://samhsa.gov/about/cmhs.aspx

HHS, SAMHSA

Center for Substance Abuse Prevention (CSAP)

As a sponsor of **Recovery Month**, this center brings effective substance use prevention to every community nationwide. Its discretionary grant programs – whether focusing on preschool-age children and high-risk youth or on community-dwelling older Americans – target states, communities, organizations, and families to promote resiliency, promote protective factors, and reduce risk factors for substance use.

240-276-2420

http://www.samhsa.gov/about/csap.aspx

HHS, SAMHSA

Center for Substance Abuse Treatment (CSAT)

As a sponsor of **Recovery Month**, this center promotes the availability and quality of community-based substance use treatment services for individuals and families who need them. It supports policies and programs to broaden the range of evidence-based effective treatment services for people who abuse alcohol and drugs and that also address other addiction-related health and human services problems.

240-276-1660

http://www.samhsa.gov/about/csat.aspx

U.S. Department of Justice (DOJ) Drug Enforcement Administration (DEA)

This federal government agency enforces the nation's controlled substances laws and regulations, works to reduce the availability of illegal drugs, and has a prevention arm devoted to reducing the demand for these drugs. The DEA contributes its "street-smart" perspective and skills to the field and helps to link law enforcement with other providers.

202-307-1000

http://www.dea.gov

DOJ, DEA

Get Smart About Drugs

This DEA program is a resource for parents about how and why teens abuse prescription drugs.

202-307-1000

http://www.getsmartaboutdrugs.com

DOJ, Community Capacity Development Office

This multi-agency's strategy is to "weed out" violent crime, gang activity, and drug trafficking. It seeks to "seed" human services to the areas where these activities occur, encompassing prevention, intervention, treatment, and neighborhood revitalization.

202-616-1152

http://www.ojp.usdoj.gov/ccdo



U.S. Department of Transportation (DOT) National Highway Traffic Safety Administration (NHTSA)

The mission of this agency is to develop partnerships to cooperatively save lives, prevent injuries, and reduce traffic-related health care and economic costs resulting from impaired driving from using alcohol and other drugs.

888-327-4236

http://www.nhtsa.gov

U.S. Psychiatric Rehabilitation Association (USPRA)

This association and its members developed and defined the practice of psychosocial and psychiatric rehabilitation, establishing these services as integral to community-based treatment and leading the recovery movement. With nearly 1,400 members, this association seeks to advance the availability and practice of psychiatric rehabilitation so that all individuals with a serious mental illness have access to the supports they need to recover.

410-789-7054

http://www.uspra.org

U.S. Small Business Administration (SBA) – Paul D. Coverdell Drug Free Workplace Program

Grantees of this program assist small businesses with the implementation of a drug-free workplace program by providing financial, technical, and management assistance, including information about grants/loans and employee assistance programs.

800-827-5722

http://www.sba.gov

United Advocates for Children and Families (UACF)

This is a nonprofit organization with a mission to improve the quality of life for all children and youth with mental, emotional, and behavioral challenges and to eliminate institutional discrimination and social stigma.

916-643-1530

http://www.uacf4hope.org

United for Recovery

This nonprofit organization is an advocacy group for people in treatment and in recovery. It works to broaden public awareness and understanding of addiction and recovery and increase opportunities for people to get the help they need.

402-434-2730

http://www.unitedforrecovery.org

United Methodist Church – General Board of Church and Society of the United Methodist Church (UMC-GBCS)

This agency of the United Methodist Church offers faith-based substance use prevention advocacy training for local churches, as well as faith-based programs for churches to de-stigmatize addiction and provide church-wide training on substance use disorders.

202-488-5600

http://www.umc-gbcs.org

University of Baltimore, School of Law Center for Families, Children, and the Courts

This group's mission is to create, foster, and support a national movement to integrate communities, families, and the justice system to improve the lives of families and the health of the community.

410-837-5750

http://law.ubalt.edu/cfcc

Voices of Recovery, San Mateo Valley

This organization is for people seeking and maintaining long-term recovery from their own addictions, and long-term recovery from being affected by other people's addictions. It provides community educational and recovery support services.

650-630-4211

http://www.voicesofrecovery-sm.org



Volunteers of America

This is a national, nonprofit, faith-based organization dedicated to helping those in need rebuild their lives and reach their full potential. Through thousands of human service programs, including housing and health care, the group helps nearly 2 million people in more than 400 communities.

800-899-0089 703-341-5000 http://www.voa.org

White Bison, Inc.

This nonprofit organization disseminates culturally based principles, values, and teachings to support healthy community development and servant leadership, and to support healing from alcohol, substance abuse, co-occurring disorders, and intergenerational trauma. It offers learning resources to the Native American community nationwide on topics such as sobriety, recovery, prevention, and wellness.

877-871-1495 719-548-1000 http://www.whitebison.org



PREVENTION, TREATMENT, AND RECOVERY RESOURCES

The following is a list of mental and substance use resources that can help you during **National Recovery Month** (**Recovery Month**) and throughout the year. The resources listed below include organizations, programs, initiatives, and online tools that provide mental and/or substance use disorder services. The resources are listed by category to help you quickly identify the resource(s) most closely aligned with your needs. Resources cover a variety of subject areas, including culture, policy, education, recovery support groups, mental illness, prevention, and more. The referenced organizations represent a broad sampling of what is available nationwide. Organizations in purple are **Recovery Month** Planning Partners and are heavily involved in planning activities.

Please note: This list is not exhaustive of all available resources. Inclusion does not constitute endorsement by the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov) or Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov).

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FEDERAL AGENCIES AND REPRESENTATIVES

GENERAL INFORMATION ABOUT MENTAL AND/ OR SUBSTANCE USE DISORDERS

These government agencies offer a broad range of resources to assist individuals with mental and/or substance use disorders, as well as their families.

Executive Office of the President (EOP) White House Office of Faith-Based and Neighborhood Partnerships

This office coordinates 12 Federal Centers for Faith-based and Community Initiatives. Its goal is to ensure that grassroots leaders can compete on an equal footing for federal dollars, receive greater private support, and face fewer bureaucratic barriers.

708 Jackson Place Washington, DC 20502 202-456-3394

http://www.whitehouse.gov/administration/eop/ofbnp

EOP, White House Office of National Drug Control Policy (ONDCP)

This component of the Executive Office of the President establishes policies, priorities, and objectives for the nation's drug control program, which includes prevention, treatment, and recovery.

750 17th Street, NW Washington, D.C. 20503 202-395-6700

http://www.whitehouse.gov/ondcp

U.S. Agency for International Development (USAID)

This independent federal government agency receives overall foreign policy guidance from the Secretary of State. The agency supports long-term and equitable economic growth and advances U.S. foreign policy objectives by supporting economic growth, agriculture, and trade; global health; and democracy, conflict prevention, and humanitarian assistance.

Ronald Reagan Building 1300 Pennsylvania Avenue NW Washington, DC 20523 202-712-4810 http://www.usaid.gov

U.S. Department of Health and Human Services (HHS)

This federal government agency protects the health of all Americans and provides essential human services, especially for those who are least able to help themselves.

200 Independence Avenue SW Washington, DC 20201 877-696-6775 http://www.hhs.gov

HHS, Administration on Aging (AoA)

This organization's mission is to develop a comprehensive, coordinated, and cost-effective system of home and community-based services that helps elderly individuals maintain their health and independence in their homes and communities.

One Massachusetts Avenue NW Washington, DC 20201 202-619-0724

http://www.aoa.gov

HHS, Agency for Healthcare Research and Quality (AHRQ)

This agency's mission is to improve the quality, safety, efficiency, and effectiveness of health care for all Americans. Information from AHRQ's research helps people make more informed decisions and improve the quality of health care services.

540 Gaither Road, Suite 200 Rockville, MD 20850 301-427-1104 http://www.ahrq.gov

HHS, Centers for Disease Control and Prevention (CDC)

For more than 60 years, this organization has been dedicated to protecting health and promoting quality of life through the prevention and control of disease, injury, and disability. The CDC is committed to programs that reduce the health and economic consequences of the leading causes of death and disability, thereby ensuring a long, productive, healthy life for all people.

1600 Clifton Road Atlanta, GA 30333 800-CDC-INFO (232-4636) 888-232-6348 (TTY) http://www.cdc.gov

HHS, CDC, National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)

This center is at the forefront of the nation's efforts to prevent and control chronic diseases, and leads efforts that promote health and well-being through prevention and control of chronic diseases.

4770 Buford Highway NE MS K-50 Atlanta, GA 30341 800-CDC-INFO (232-4636) 888-232-6348 (TTY)

http://www.cdc.gov/chronicdisease/about/index.htm

HHS, CDC, National Center for HIV, STD, and TB Prevention, Divisions of HIV/AIDS Prevention (NCHSTP)

As the federal government's lead agency in combating HIV/AIDS, the CDC and this center is a source of extensive data, public education materials, and prevention information accessible through numerous links on its website. The center provides statistics and prevention measures relating to HIV/AIDS risks and prevalence among drug users.

1600 Clifton Road Atlanta, GA 30333 800-CDC-INFO (232-4636) 888-232-6348 (TTY) http://www.cdc.gov/nchhstp/Default.htm

HHS, CDC, Office on Smoking and Health (OSH)

This office is a division within the National Center for Chronic Disease Prevention and Health Promotion, one of the CDC centers. The CDC OSH website, http://www.cdc.gov/tobacco, contains numerous resources, such as Taking Action Against Secondhand Smoke – An Online Toolkit, CAPS – Community Actions and Practices, and National Tobacco Control Program

4770 Buford Highway NE MS K-50 Atlanta, GA 30341 800-CDC-INFO (232-4636) 888-232-6348 (TTY) 800-QUIT-NOW (784-8669) 800-332-8615 (TYY) http://www.cdc.gov/tobacco

HHS, Center for Medicare and Medicaid Services (CMS)

This federal agency includes ten field offices based on the Agency's key lines of business:
Medicare health plans, Medicare financial management, Medicare fee-for-service operations, Medicaid and children's health, survey and certification, and quality improvement.

7500 Security Boulevard Baltimore, MD 21244 877-267-2323 410-786-3000 http://www.cms.hhs.gov

HHS, Food and Drug Administration (FDA)

This government agency is responsible for protecting public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines and other biological products; medical devices; our nation's food supply; cosmetics; dietary supplements; and products that give off radiation.

10903 New Hampshire Avenue Silver Spring, MD 20993 888-INFO-FDA (463-6332) http://www.fda.gov

HHS, FDA, MedWatch

This website is the FDA gateway for finding clinically important safety information and reporting serious problems with human medical products.

http://www.fda.gov/safety/medwatch/default.htm

HHS, Health Resources and Services Administration (HRSA)

This federal agency's mission is to improve and expand access to quality health care for all. Comprising of six bureaus and ten offices, HRSA provides leadership and financial support to health care providers in every state and U.S. territory.

Parklawn Building 5600 Fishers Lane Rockville, MD 20857 888-ASK-HRSA (275-4772) http://www.hrsa.gov

HHS, HRSA, Poison Control Program

This program oversees the national toll-free Poison Help Line, 1-800-222-1222, which connects callers to their nearest poison center, 24 hours a day, 7 days a week for help in a poisoning emergency. Calls are free and confidential and can be translated into 161 languages.

Parklawn Building 5600 Fishers Lane Rockville, MD 20857 800-222-1222 http://www.poisonhelp.hrsa.gov

HHS, National Institutes of Health (NIH)

This institute, a part of the HHS, is the nation's medical research agency – making important discoveries that improve health and save lives. Thanks in large part to NIH-funded medical research, Americans today are living longer and healthier.

9000 Rockville Pike Bethesda, MD 20892 301-496-4000 301-402-9612 (TTY) http://www.nih.gov

HHS, NIH, National Center for Complementary and Alternative Medicine (NCCAM)

This is the federal government's lead agency for scientific research on complementary and alternative medicine (CAM). It is one of the 27 institutes and centers that make up the National Institutes of Health (NIH) within HHS. NCCAM sponsors and conducts research using scientific methods and advanced technologies to study CAM. CAM is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine.

31 Center Drive, MSC 2182 Building 31, Room 2B-11 Bethesda, MD 20892 888-644-6226 http://nccam.nih.gov

HHS, NIH, National Institute on Alcohol Abuse and Alcoholism (NIAAA)

This federal institute provides leadership in the national effort to reduce alcohol-related problems and promote recovery by conducting and supporting research in a wide range of scientific areas.

5635 Fishers Lane, MSC 9304 Bethesda, MD 20892 301-443-2857 http://www.niaaa.nih.gov

HHS, NIH, National Institute on Drug Abuse (NIDA)

This federal institute supports most of the world's research on the health aspects of drug abuse and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.

6001 Executive Boulevard, MSC 9561 Bethesda, MD 20892 301-443-1124 http://www.drugabuse.gov

HHS, NIH, National Institute of Mental Health (NIMH)

This institute's mission is to transform the understanding and treatment of mental illness through basic and clinical research, paving the way for prevention and recovery. For the institute to continue fulfilling this vital public health mission, it must foster innovative thinking and ensure that a full array of novel scientific perspectives are used to further discovery in the evolving science of brain, behavior, and experience.

6001 Executive Boulevard Room 6200, MSC 9663 Bethesda, MD 20892 301-443-4513 866-615-6464 http://www.nimh.nih.gov

HHS, Office of the Assistant Secretary for Health (OASH)

This group oversees 14 core public health office – including the Office of the Surgeon General and the U.S. Public Health Service Corps – as well as 10 regional health offices across the nation and 10 Presidential and Secretarial advisory committees.

200 Independence Avenue SW Washington, DC 20201 202-690-7694 http://www.hhs.gov/ash

HHS, Office on Disability (OD)

The organization's mission is to oversee the implementation and coordination of programs and policies that enhance the health and well-being of people with disabilities. OD works directly with the agencies in HHS to facilitate policy development and to advance disability issues across agency and departmental lines. OD identifies opportunities to maximize and streamline processes that result in the elimination of inefficient or redundant efforts to serve

200 Independence Avenue S, Room 637D Washington, DC 20201 877-696-6775 http://www.hhs.gov/od

HHS, Substance Abuse and Mental Health Services Administration (SAMHSA)

This federal agency improves the quality and availability of prevention, treatment, and rehabilitative services to reduce illness, death, disability, and cost to society resulting from mental and/or substance use disorders. It lists a range of resources on its "Find Substance Abuse and Mental Illness Treatment" website, http://www.samhsa.gov/treatment.

1 Choke Cherry Road Rockville, MD 20857 877-SAMHSA-7 (726-4727) 800-487-4889 (TTY) http://www.samhsa.gov

HHS, SAMHSA, Center for Behavioral Health Statistics and Quality (CBHSQ)

This office (formerly the Office of Applied Studies) has primary responsibility for the collection, analysis, and dissemination of behavioral health data.

1 Choke Cherry Road Rockville, MD 20857 240-276-1250

http://www.samhsa.gov/about/cbhsq.aspx

HHS, SAMHSA, Center for Mental Health Services (CMHS)

As a sponsor of **Recovery Month**, this federal center seeks to improve the availability and accessibility of high-quality community-based services for people with or at risk for mental illness and their families. It collects, analyzes, and disseminates national data on mental illness services designed to help inform future services policy and program decision-making.

1 Choke Cherry Road Rockville, MD 20847 240-276-1310

http://www.samhsa.gov/about/cmhs.aspx

HHS, SAMHSA, CMHS, Wellness Initiative

Since 2007, this initiative has promoted the improved wellness of people with behavioral health problems by engaging, educating, and training providers, consumers, and policy makers. SAMHSA's Wellness efforts are guided by its partners and a multidisciplinary Steering Committee representing people with mental and substance use disorders, people in recovery from mental and substance use disorders, families, peer-run and community-based organizations, behavioral health care providers, primary care providers, and researchers.

2121 K Street NW, Suite 650 Washington, DC 20037 http://promoteacceptance.samhsa.gov/10by10

HHS, SAMHSA, Center for Substance Abuse Prevention (CSAP)

As a sponsor of **Recovery Month**, the mission of this center is to bring effective substance use prevention to every community nationwide. Its discretionary grant programs - whether focusing on preschool-age children and high-risk youth or on community-dwelling older Americans - target states, communities, organizations, and families to promote resiliency, promote protective factors, and reduce risk factors for substance use.

1 Choke Cherry Road Rockville, MD 20857 240-276-2420

http://www.samhsa.gov/about/csap.aspx http://www.samhsa.gov/prevention

HHS, SAMHSA, Center for Substance Abuse Treatment (CSAT)

As a sponsor of **Recovery Month**, this organization promotes the availability and quality of community-based substance use treatment services for individuals and families who need them. It supports policies and programs to broaden the range of evidence-based effective treatment services for people who abuse alcohol and drugs and that also address other addiction-related health and human services problems.

1 Choke Cherry Road Rockville, MD 20857 240-276-1660

http://www.samhsa.gov/about/csat.aspx

HHS, SAMHSA, Regional Administrators

Regional Administrators help SAMHSA reach out to and provide information for states, territories, tribes, providers, communities, and other stakeholders, regarding funding opportunities, federal policies affecting them, and disaster preparedness and response. They also make it easier for SAMHSA to collaborate with other HHS colleagues in the regional offices and be better informed about behavioral health needs throughout the country.

http://www.samhsa.gov/about/regions/index.aspx

Region I (Serving CT, ME, MA, NH, RI, VT)

A. Kathryn Power, M.Ed.
JFK Federal Building
Boston, MA 02203
kathryn.power@samhsa.hhs.gov

Region II (Serving NJ, NY, Puerto Rico, U.S. Virgin Islands)

Dennis O. Romero 26 Federal Plaza New York, NY 10278 dennis.romero@samhsa.hhs.gov

Region III (Serving DE, DC, MD, PA, VA, WV)

Jean Bennett 150 South Independence Mall West Philadelphia, PA 19106 jean.bennett@samhsa.hhs.gov

Region IV (Serving AL, FL, GA, KY, MS, NC, SC, TN)

Stephanie McCladdie 61 Forsyth Street Southwest Atlanta, GA 30303 stephanie.mccladdie@samhsa.hhs.gov

Region V (Serving IL, IN, MI, MN, OH, WI)

Jeff A. Coady, Psy.D. 233 North Michigan Avenue, Suite 200 Chicago, Il 60601 jeff.coady@samhsa.hhs.gov

Region VI (Serving AR, LA, NM, OK, TX)

Michael Duffy, R.N., B.S.N. 1301 Young Street, Suite 1030 Dallas, TX 75202 michael.duffy@samhsa.hhs.gov

Region VII (Serving IA, KS, MO, NE)

Laura Howard, J.D.
601 East 12th Street
Kansas City, MO 64106
laura.howard@samhsa.hhs.gov

Region VIII (Serving CO, MT, ND, SD, UT, WY)

Charles Smith, Ph.D.
999 18th Street South Tower
Room 4-342
Denver, CO 80294
charles.smith@samhsa.hhs.gov

Region IX (Serving AZ, CA, HI, NV, Guam, American Samoa, Northern Mariana Islands, Federated States of Micronesia, Marshall Islands, Palau)

Jon Perez, Ph.D. 90 Seventh Street, Eighth Floor San Francisco, CA 94103 jon.perez@samhsa.hhs.gov

Region X (Serving AK, ID, OR, WA)

David Dickinson 2201 Sixth Avenue, MS RX-02 Seattle, WA 98121 david.dickinson@samhsa.hhs.gov

HHS, SAMHSA, Technical Assistance Centers

These centers, supported by SAMHSA funding, enhance mental and/or substance use disorder prevention, treatment, and recovery services.

Addiction Technology Transfer Center Network (ATTC)

For a full description, refer to Research.

Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS)

This initiative establishes a consortium dedicated to promoting wide-scale adoption of recovery-oriented supports, services, and systems for people in recovery from mental and/or substance use disorders.

1 Choke Cherry Road Rockville, MD 20857 877-SAMHSA-7 (726-4727)

Center for Integrated Health Solutions (CIHS)

This center, funded by HRSA and SAMHSA, promotes the development of integrated primary and behavioral health services to better address the needs of individuals with mental and substance use conditions, whether seen in specialty behavioral health or primary care provider settings.

1701 K Street NW, Suite 400 Washington, DC 20006 202-684-7457 http://www.integration.samhsa.gov

Collaborative for the Application of Prevention Technologies (CAPT)

CAPT is a national substance abuse prevention training and technical assistance system dedicated to strengthening prevention systems and the nation's behavioral health workforce.

43 Foundry Avenue Waltham, MA 02453 888-EDC-CAPT (332-2278) http://captus.samhsa.gov

Co-occurring Disorders Center of Excellence

The Co-occurring Disorders Center of Excellence integrates treatment that addresses mental and substance use conditions to provide better outcomes for substance use, psychiatric symptoms and functioning, decreased hospitalization, increased housing stability, and an improved quality of life.

1 Choke Cherry Road Rockville, MD 20857 877-SAMHSA-7 (726-4727) http://www.samhsa.gov/co-occurring

Disaster Technical Assistance Center (DTAC)

The DTAC supports SAMHSA's efforts to prepare states, territories, tribes, and local entities to deliver an effective mental and/or substance use behavioral health response to disasters.

4350 East West Highway, Suite 1100 Bethesda, MD 20814 800-308-3515 http://www.samhsa.gov/dtac

The Family Café For a full description, refer to Mental Illness.

Fetal Alcohol Spectrum Disorders (FASD) Center for Excellence

The FASD Center is a federal initiative devoted to preventing and treating the effects of alcohol on an individual whose mother drank during pregnancy by providing national leadership and facilitating collaboration in the field. These effects may include physical, mental, behavioral, and/or learning disabilities, with possible lifelong implications.

SAMHSA FASD Center for Excellence 2101 Gaither Road, Suite 600 Rockville, MD 20850 866-STOPFAS (786-7327) http://www.fasdcenter.samhsa.gov

Center for Financing Reform and Innovation (CFRI)

This center provides information, analysis, products, and technical assistance to address changes in the organization and financing of behavioral health care and to guide federal officials, states, territories, tribes, communities, and private payers on the most effective and efficient use of available resources to meet the prevention, treatment, and recovery support needs of the American public.

1 Choke Cherry Road Rockville, MD 20857 877-SAMHSA-7 (726-4727) http://www.samhsa.gov/healthreform

Homelessness Resource Center (HRC)

The HRC is an interactive community of providers, consumers, policymakers, researchers, and public agencies at federal, state, and local levels. It seeks to improve the lives of people affected by homelessness who have mental illness, substance use issues, and histories of trauma.

1 Choke Cherry Road Rockville, MD 20857 877-SAMHSA-7 (726-4727) http://homeless.samhsa.gov

National Center for Trauma-Informed Care (NCTIC)

The NCTIC is a technical assistance center dedicated to building awareness of trauma-informed care and promoting the implementation of trauma-informed practices in programs and services.

66 Canal Center Plaza, Suite 302 Alexandria, VA 22314 866-254-4819 http://www.samhsa.gov/nctic

National Center on Substance Abuse and Child Welfare (NCSACW)

The NCSACW improves systems and practices for families with substance use disorders who are involved in the child welfare and family judicial systems by assisting local, state, and tribal agencies.

1 Choke Cherry Road Rockville, MD 20857 866-493-2758 http://www.ncsacw.samhsa.gov

National Gains Center
For a full description, refer to Mental Illness.

Resource Center to Promote Acceptance, Dignity, and Social Inclusion Associated with Mental Health (ADS Center) For a full description, refer to Mental Illness.

National Technical Assistance Center for Children's Mental Health (NTAC)

The NTAC improves the quality of care for the mental illness needs of children, youth, and their families at the policy, research, training and consultation, and direct-service levels.

Center for Child and Human Development Georgetown University P.O. Box 571485 Washington, DC 20057 202-687-5000 http://gucchd.georgetown.edu/67211.html

Native American Center for Excellence (NACE)

For a full description, refer to Culture-Specific Resources.

Projects for Assistance in Transition from Homelessness (PATH)

PATH provides community-based outreach, mental illness, substance abuse, and other support services, as well as a limited set of housing services to people with serious mental illness, including those with co-occurring substance use disorders, who are experiencing homelessness or at risk of becoming homeless.

1 Choke Cherry Road Rockville, MD 20857 877-SAMHSA-7 (726-4727) http://pathprogram.samhsa.gov

Suicide Prevention Resource Center (SPRC) For a full description, refer to Mental Illness.

HHS, U.S. Department of Agriculture (USDA), Dietary Guidelines for Americans

This federal agency is responsible for developing and executing U.S. policy on farming, agriculture, and food. Dietary Guidelines for Americans has been published jointly by HHS and USDA every five years since 1980. Of interest to those engaged in efforts to prevent alcohol abuse and alcohol-related problems are the Chapter 3 guidelines for alcohol consumption, which constitute a de facto "official" definition of moderate or responsible alcohol use.

1400 Independence Avenue SW Washington, DC 20250 202-720-2791 http://www.health.gov/dietaryguidelines

CULTURE-SPECIFIC RESOURCES

These government agencies provide mental and/or substance use resources that are targeted toward specific populations.

HHS, Indian Health Service

This agency offers health services for Alaska Natives and American Indians. The IHS is the principal federal health care provider and health advocate for Indian people, and its goal is to raise their health status to the highest possible level.

The Reyes Building 801 Thompson Avenue, Suite 400 Rockville, MD 20852 301-443-3593 http://www.ihs.gov

HHS, Office of Minority Health Resource Center

This office is dedicated to improving the health of racial and ethnic minority populations through the development of health policies and programs that will help eliminate health disparities.

P.O. Box 37337 Washington, DC 20013 800-444-6472 http://www.minorityhealth.hhs.gov

U.S. Department of Interior (DOI)

This government agency offers resources on prevention, treatment, and recovery services for mental illness and substance use disorders among American Indians, Alaska Natives, and island communities.

1849 C Street NW Washington, DC 20240 202-208-3100 http://www.doi.gov

DOI, Office of Alcohol and Substance Abuse Prevention, Bureau of Indian Affairs

This office in the DOI provides reservationbased behavioral health service programs for American Indians.

1849 C Street NW, MS-4606-M1B Washington, DC 20240 202-208-5116 http://www.bia.gov

SAMHSA, Native American Center for Excellence (NACE)

This SAMHSA initiative provides up-to-date information on American Indian and Alaska Native (AI/AN) mental and substance use disorder prevention programs, practices, and policies. NACE also provides training and technical assistance support for urban and rural prevention programs serving AI/AN populations.

1395 Piccard Drive, Suite 200 Rockville, MD 20850 301-509-5851 http://nace.samhsa.gov

EDUCATION

These agencies seek to increase understanding of mental and substance use disorders through research and programming.

HHS, NIH, National Library of Medicine (NLM)

This library contains extensive mental and substance use disorder research.

8600 Rockville Pike Bethesda, MD 20894 888-346-3656 (FIND-NLM) http://www.nlm.nih.gov

6001 Executive Boulevard

Room 5213, MSC 9561

HHS, NIH, NIDA, Office of Science Policy and Communications

This government office conducts science-based research on substance use disorders.

Bethesda, MD 20892 301-443-1124 http://www.nida.nih.gov/about/organization/ OSPC/OSPC.html

HHS, Office of Civil Rights (OCR)

As the Department's civil rights and health privacy rights law enforcement agency, OCR investigates complaints, enforces rights, and promulgates regulations, develops policy, and provides technical assistance and public education to ensure understanding of and compliance with non-discrimination and health information privacy laws.

200 Independence Avenue SW Room 509F, HHH Building Washington, DC 20201 800-368-1019 http://www.hhs.gov/ocr

HHS, SAMHSA, Center for Substance Abuse Treatment, *Road to Recovery* Television and Radio Series

This SAMHSA-sponsored television and radio series, which discusses mental and substance use disorders, is produced monthly and available on the **Recovery Month** website.

http://www.recoverymonth.gov/Multimedia/Road-to-Recovery-Television-Series.aspx http://www.recoverymonth.gov/Multimedia/Road-to-Recovery-Radio-Series.aspx

JUSTICE SYSTEM

These government agencies offer resources to individuals in the justice system, their families, and those working in the justice system.

U.S. Department of Justice (DOJ)

This federal government agency enforces the law and defends the interests of the United States according to the law, including drug enforcement.

950 Pennsylvania Avenue NW Washington, DC 20530 202-514-2000 http://www.usdoj.gov

DOJ, Americans with Disabilities Act (ADA), Information and Technical Assistance

This federal department provides information about the Americans with Disabilities Act (ADA) through a toll-free ADA Information Line and website. These resources allow businesses, states, local governments, and others to call and ask questions about general or specific ADA issues. U.S. Department of Justice, Civil Rights Division

Disability Rights Section – NYA 950 Pennsylvania Avenue NW Washington, DC 20530 800-514-0301 800-514-0383 (TTY) http://www.ada.gov

DOJ, Office of Justice Programs (OJP)

The substance abuse and crime section of this organization's website contains many resources, including training and technical assistance opportunities.

Office of Justice Programs
U.S. Department of Justice
810 Seventh Street NW
Washington, DC 20531
202-307-0703
http://www.ojp.usdoj.gov/index.htm

DOJ, OJP, Bureau of Justice Assistance (BJA)

This bureau supports law enforcement, courts, corrections, treatment, victim services, technology, and prevention initiatives that strengthen the nation's criminal justice system. This bureau runs the Drug Court Program and the Mental Health Court Program.

810 Seventh Street NW Washington, DC 20531 202-616-6500 https://www.bja.gov/Default.aspx

DOJ, OJP, Bureau of Justice Statistics (BJS)

The BJS works to collect, analyze, publish, and disseminate information on crime, criminal offenders, victims of crime, and the operation of justice systems at all levels of government. These data are critical to federal, state, and local policymakers in combating crime and ensuring that justice is both efficient and evenhanded.

810 Seventh Street NW Washington, DC 20531 202-307-0765 http://bjs.ojp.usdoj.gov

DOJ, Drug Enforcement Administration (DEA)

This federal government agency enforces the nation's controlled substances laws and regulations, works to reduce the availability of illegal drugs, and has a prevention arm devoted to reducing the demand for these drugs. The DEA contributes its "street-smart" perspective and skills to the field and helps to link law enforcement with other providers.

800 K Street NW, Suite 500 Washington, D.C 20007 202-307-1000

http://www.justice.gov/dea/index.shtml

DOJ, National Criminal Justice Reference Service

To support research, policy, and program development worldwide, this federal organization provides criminal justice, and mental and substance use disorder information.

P.O. Box 6000 Rockville, MD 20849 800-851-3420 http://www.ncjrs.gov

DOJ, OJP, National Institute of Corrections (NIC)

The NIC provides training, technical assistance, information services, and policy/program development assistance to federal, state, and local corrections agencies. This agency within the U.S. Department of Justice, Federal Bureau of Prisons is headed by a Director appointed by the U.S. Attorney General. A 16-member Advisory Board, also appointed by the Attorney General, was established by the enabling legislation (Public Law 93-415) to provide policy direction to the Institute.

320 First Street NW Washington, DC 20534 800-995-6423 http://nicic.gov

DOJ, OJP, National Institute of Justice (NIJ)

This organization is the research, development, and evaluation agency of the U.S. Department of Justice. It provides objective, independent, evidence-based knowledge and tools to meet the challenges of crime and justice, particularly at the state and local levels.

810 Seventh Street NW Washington, DC 20531 http://www.ojp.usdoj.gov/nij/about/welcome.htm

DOJ, OJP, Office of the Assistant Attorney General (OAAG)

This group is responsible for the overall management and oversight of OJP. This includes setting policy; ensuring that OJP policies and programs reflect the priorities of the President, the Attorney General, and Congress; and promoting coordination among the OJP offices and bureaus.

810 Seventh Street NW
Washington, DC 20531
202-307-0703
http://www.ojp.usdoj.gov/about/offices/oaag.htm

DOJ, OJP, Office of Juvenile Justice and Delinquency Prevention (OJJDP)

This organization provides national leadership, coordination, and resources to prevent and respond to juvenile delinquency and victimization. OJJDP supports states and communities in developing and implementing effective and coordinated prevention and intervention programs. It also collaborates to improve the juvenile justice system so that it protects public safety, holds offenders accountable, and provides treatment and rehabilitative services tailored to the needs of juveniles and their families.

810 Seventh Street NW Washington, DC 20531 202-307-5911 http://www.ojjdp.gov

DOJ, OJP, Office for Victims of Crime (OVC)

Established in 1988 through an amendment to the Victims of Crime Act (VOCA) of 1984, this group is charged by Congress with administering the Crime Victims Fund (the Fund). Through OVC, the Fund supports a broad array of programs and services that focus on helping victims in the immediate aftermath of crime and continuing to support them as they rebuild their lives. Millions of dollars are invested annually in victim compensation and assistance in every U.S. state and territory, as well as for training, technical assistance, and other capacity-building programs designed to enhance service providers' ability to support victims of crime in communities across the nation.

810 Seventh Street NW, Eighth Floor Washington, DC 20531 202-307-5983 http://www.ojp.usdoj.gov/ovc

DOJ, OJP, Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking Office (SMART)

This group was authorized by the Adam Walsh Child Protection and Safety Act of 2006 to administer the standards for the Sex Offender Registration and Notification Program. Under this program, SMART can administer grant programs relating to sex offender registration and notification. It also cooperates with and provides technical assistance to states, the District of Columbia, principle U.S. Territories, units of local government, tribal governments, and other public and private entities involved in activities related to sex offender registration or notification, or to other measures for the protection of children or other members of the public from sexual abuse or exploitation.

810 Seventh Street NW Washington, DC 20531 202-514-4689 http://www.ojp.gov/smart

U.S. Department of Transportation (DOT), National Highway Traffic Safety Administration (NHTSA)

The mission of this agency is to develop partnerships to cooperatively save lives, prevent injuries, and reduce traffic-related health care and economic costs resulting from impaired driving from using alcohol and other drugs.

1200 New Jersey Avenue SE West Building Washington, DC 20590 888-327-4236 http://www.nhtsa.gov

DOT, NHTSA, Stop Impaired Driving

This campaign partners with criminal justice and community organizations to sponsor impaired driving campaigns such as You Drink & Drive, You Lose, Friends Don't Let Friends Drive Drunk, and Zero Tolerance Means Zero Chances. The Stop Impaired Drinking website includes program toolkits, success stories, and other resources.

NHTSA Headquarters
1200 New Jersey Avenue SE
West Building
Washington, DC 20590
888-327-4236
http://www.nhtsa.gov/StopImpairedDriving

MENTAL ILLNESS

These government agencies are dedicated to offering mental illness services, as well as increasing education and awareness of mental disorders.

HHS, NIH, National Institute of Mental Health (NIMH)

For a full description, refer to General Information About Mental and/or Substance Use Disorders

HHS, SAMHSA, Center for Mental Health Services (CMHS)

For a full description, refer to General Information About Mental and/or Substance Use Disorders.

HHS, SAMHSA, CMHS, National GAINS Center

This center has operated since 1995 as a national focus for the collection and dissemination of information about effective mental and substance use disorder services for people with co-occurring disorders in contact with the justice system. The TAPA Center for Jail Diversion and the Center for Evidence-Based Programs in the Justice System, funded by the Center for Mental Health Services (CMHS) in 2001 and 2004, respectively, comprise the National GAINS Center. The GAINS Center's primary focus is on expanding access to community-based services for adults diagnosed with co-occurring mental and substance use disorders at all points of contact with the justice system.

800-311-GAIN (4246) http://gainscenter.samhsa.gov

HHS, SAMHSA, CMHS, Resource Center to Promote Acceptance, Dignity and Social Inclusion Associated with Mental Health (ADS Center)

This center enhances acceptance and social inclusion by ensuring that people with mental illness can live full, productive lives within communities without fear of prejudice and discrimination. It provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

4350 East West Highway, Suite 1100 Bethesda, MD 20814 800-540-0320

http://www.stopstigma.samhsa.gov

HHS, SAMHSA, CMHS, Consumer Affairs Program

This program works in partnership with other federal agencies, as well as with public and private health and human service agencies, to develop standards and guidelines for mental disorder services, ensure that consumer mental health needs receive adequate attention, and promote consumer participation in services.

1 Choke Cherry Road, Suite 6-1069 Rockville, MD 20857 240-276-1330

http://www.samhsa.gov/consumersurvivor

HHS, SAMHSA, CMHS, Systems of Care

This website is devoted to providing information about the mental illness of children, youth, and families. Systems of care is an approach to services that recognizes the importance of family, school, and community, and seeks to promote the full potential of every child and youth by addressing their physical, emotional, intellectual, cultural, and social needs.

1 Choke Cherry Road, Sixth Floor Rockville, MD 20857 http://partnersforrecovery.samhsa.gov/rosc.html

HHS, SAMHSA, CMHS, What a Difference a Friend Makes Campaign

This campaign encourages, educates, and inspires people between the ages of 18 and 25 to support their friends who are experiencing mental illness.

http://www.whatadifference.samhsa.gov

MILITARY/VETERANS

These government agencies offer mental and substance use disorder resources to active military and veterans, and their families.

U.S. Department of Defense (DOD)

This department provides a wide array of mental and substance use disorder services, including worksite education, drug testing, early intervention, outpatient counseling, and inpatient treatment.

1400 Defense Pentagon Washington, DC 20301 703-571-3343 http://www.defense.gov

Department of Defense Center of Excellence (DCoE)

This center is part of the Military Health System, which provides a 'continuum of care' – from initial accession to deployment to discharge. DCoE works across the entire continuum of care to promote resilience, rehabilitation and reintegration for warriors, families and veterans with psychological health concerns and traumatic brain injuries.

2345 Crystal Drive Crystal Park 4, Suite 120 Arlington, VA 22202 800-510-7897 http://www.dcoe.health.mil

DOD, United States Army, Army Center for Substance Abuse Program (ACSAP)

This group supports combat readiness by providing program oversight, supervision, inspection, integration, technical assistance, and training development for the operation and management of all elements of local Army Substance Abuse Programs worldwide.

Building 1467 Ft. Knox, KY 40121 http://www.acsap.army.mil/sso/pages/index.jsp

DOD, United States Army, Armed Forces Health Surveillance Center (AFHSC)

This center provides timely, relevant, actionable, and comprehensive health surveillance information in order to promote, maintain, and enhance the health of military and military-associated populations.

11800 Tech Road, Suite 220 Silver Spring, MD 20904 301-319-3240 http://www.afhsc.army.mil/home

DOD, United States Marine Corps Marine Corps Community Services (MCCS)

This group seeks to provide the Marine Corps with plans, policies, and resources to improve and sustain the capabilities of commanders. Its goal is to prevent problems that detract from unit performance and readiness.

2034 Barnett Avenue Quantico, VA 22134 703-784-3007 http://www.usmc-mccs.org

DOD, United States Navy, Navy Alcohol & Drug Abuse Prevention Program (NADAP)

This group's mission is to support the Navy's readiness by fighting substance use. It offers information and assistance to support individual and command alcohol and drug use prevention efforts.

Navy Personnel Command 5720 Integrity Drive Millington, TN 38055 901-874-4900

http://www.public.navy.mil/bupers-npc/support/NADAP/Pages/default2.aspx

U.S. Department of Veterans Affairs (VA)

This government agency provides benefits and services to people who are veterans, family members, or survivors of veterans.

810 Vermont Avenue NW Washington, DC 20420 800-827-1000 http://www.va.gov

VA, Center for Post-Traumatic Stress Disorder (PTSD)

This center advances the clinical care and social welfare of U.S. veterans through research, education, and training on PTSD and stress-related disorders.

802-296-6300 http://www.ptsd.va.gov

VA, Veterans Crisis Line

The Veterans Crisis Line connects Veterans in crisis and their families and friends with qualified, caring VA responders through a confidential toll-free helpline, online chat, or text. Veterans and their loved ones can call 800-273-8255 and Press 1, chat online, or send a text message to 838255 to receive confidential support 24 hours a day, 7 days a week, 365 days a year.

800-273-TALK (8255) (Press 1) http://veteranscrisisline.net

PREVENTION

These government agencies emphasize prevention through public awareness and education campaigns.

DOJ, DEA, "Get it Straight! The Facts About Drugs"

For a full description, refer to Schools/ Youth under Federal Agencies.

DOJ, DEA, Just Think Twice

This website focuses on demand reduction and street-smart prevention for teenagers, aiming to educate teens about the realities of drug use

http://www.justthinktwice.com

EOP, ONDCP, Above the Influence

This campaign helps teens become more aware of the influences around them and encourages them to stay above the influence of peer pressure.

http://www.abovetheinfluence.com

EOP, ONDCP, National Youth Anti-Drug Media Campaign

A comprehensive advertising and public relations program, this campaign offers critical drug information for teens and tips for parents on keeping their kids healthy and drug-free.

http://www.whitehouse.gov/ondcp/anti-drug-media-campaign

Fetal Alcohol Spectrum Disorders (FASD)
Center for Excellence
For a full description, refer to General
Information About Mental and/or Substance
Use Disorders.

HHS, NIH, NIAAA, College Drinking Prevention Website

This website is a one-stop resource for comprehensive research-based information on issues related to alcohol abuse and binge drinking among college students, with online tools for parents, students, administrators, and more.

http://www.collegedrinkingprevention.gov

HHS, NIH, NIDA, Prevention Research

This website provides research on the prevention aspects of drug abuse and addiction.

http://www.drugabuse.gov/related-topics/prevention-research

HHS, Office of Disease Prevention and Health Healthy People 2020

This campaign provides science-based, 10-year national objectives for improving the health of all Americans. For three decades, Healthy People has established benchmarks and monitored progress over time in order to encourage collaborations across communities and sectors, empowers individuals toward making informed health decisions, and measure the impact of prevention activities.

http://www.healthypeople.gov

HHS, SAMHSA, Building Blocks for a Healthy Future

This initiative is an early childhood substance use prevention program that educates parents and caregivers about the basics of prevention to promote a healthy lifestyle.

1 Choke Cherry Road Rockville, MD 20857 301-407-6798 http://bblocks.samhsa.gov

HHS, SAMHSA,

Center for Substance Abuse Prevention (CSAP)
For a full description, refer to General
Information About Mental and/or Substance
Use Disorders.

HHS, SAMHSA, CSAP, Collaborative for the Application of Prevention Technologies (CAPT) For a full description, refer to General Information About Mental and/or Substance Use Disorders.

HHS, SAMHSA, CSAP, Prevention Pathways

This website provides information on prevention programs, program implementation, evaluation technical assistance, online courses, and a wealth of other prevention resources.

https://www.pmrts.samhsa.gov/PrevCourses

HHS, SAMHSA, CSAP, Talk. They Hear You.

This campaign gives parents and caregivers the information and resources they need to start talking early – as early as 9 years-old – with their children about the dangers of underage drinking.

http://www.samhsa.gov/underagedrinking

HHS, SAMHSA, CSAP, Too Smart To Start

This is a public education initiative that provides research-based strategies and materials to professionals and volunteers at the community level to help them conduct an underage alcohol use prevention program.

1 Choke Cherry Road Rockville, MD 20857 866-419-2514 301-407-6798

http://www.toosmarttostart.samhsa.gov

HHS, SAMHSA, National Registry of Evidencebased Programs and Practices (NREPP)

This is a searchable database of interventions for the prevention and treatment of mental and substance use disorders. NREPP publishes intervention summaries on its website for every intervention it reviews.

866-436-7377

http://www.nrepp.samhsa.gov

HHS, SAMHSA, Stop Underage Drinking Portal of Federal Resources

This website is a comprehensive portal of federal resources for information on underage drinking and ideas for combating this issue.

1 Choke Cherry Road Rockville, MD 20857 866-419-2514 301-407-6798

http://www.stopalcoholabuse.gov

SCHOOLS/YOUTH

These government agencies offer mental and/or substance use disorder prevention, treatment, and recovery resources targeted toward youth, parents, and educators.

U.S. Department of Education (ED)

This department makes information available to students, parents, teachers, and administrators, including grants for behavioral health programs.

400 Maryland Avenue SW Washington, DC 20202 800-872-5327

http://www.ed.gov

nidrr/index.html

ED, Office of Special Educational Rehabilitative Services (OSERS)

This office provides leadership and support for a comprehensive program of research related to the rehabilitation of individuals with disabilities. All of its programmatic efforts are aimed at improving the lives of individuals with disabilities from birth through adulthood.

400 Maryland Avenue SW Washington, DC 20202 202-245-7468 http://www2.ed.gov/about/offices/list/osers/

ED, Office of Safe and Healthy Students

This office provides useful and timely information about safe and supportive schools; health, mental health, environmental health, and physical education; drug-violence prevention; character and civic education; and homeland security, emergency management and of issues that are important to elementary and secondary education.

Potomac Center Plaza 550 12th Street, SW, 10th Floor Washington, DC 20202 202-245-7896 http://www2.ed.gov/about/offices/list/osdfs/index.html

DOJ, DEA, Get Smart About Drugs

This DEA program provides educational resources about substance use.

http://www.getsmartaboutdrugs.com

HHS, NIH, NIDA, Heads Up Website

Through a continuing partnership, NIDA and Scholastic, Inc., the global children's publishing and media company, distribute information on the health effects of drugs to students and teachers in grades 5 through 10 nationwide through a program called "Heads Up: Real News About Drugs and Your Body."

http://headsup.scholastic.com

HHS, NIH, NIDA, NIDA for Teens

This website educates adolescents ages 11 through 15 (as well as their parents and teachers) about the science behind substance use.

http://www.teens.drugabuse.gov

HHS, NIH, NIDA, NIDA Goes Back to School Website

This website is a source of free information about the latest science-based substance abuse publications and teaching materials. The site is targeted toward teachers and parents.

http://drugpubs.drugabuse.gov/promotions/back-to-school

HHS, SAMHSA, CSAP, Safe Schools/Health Students (SS/HS), A Comprehensive Approach to Youth Violence Prevention

This initiative is a unique federal grant-making program designed to prevent violence and substance abuse among our nation's youth, schools, and communities.

202-260-3954

http://www.sshs.samhsa.gov/default.aspx

HHS, SAMHSA, CSAP, Stop Underage Drinking Portal of Federal Resources For a full description, refer to Prevention.

TREATMENT/RECOVERY

These government agencies provide mental and/or substance use disorder recovery and treatment research, educational materials, and service referrals.

HHS, NIH, NIDA, Treatment Research

This website provides research on the treatment aspects of drug abuse and addiction.

http://www.drugabuse.gov/drugpages/treatment.html

HHS, SAMHSA, Co-Occurring Center for Excellence (COCE)

This center provides the technical, informational, and training resources needed for the dissemination of knowledge and the adoption of evidence-based practices in systems and programs that serve people with co-occurring disorders.

http://www.samhsa.gov/co-occurring

HHS, SAMHSA, SAMHSA's Treatment Locator and National Helpline

Provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish, either via phone or via a searchable directory.

800-662-HELP (662-4357)

http://www.samhsa.gov/treatment/index.aspx

HHS, SAMHSA, Center for Substance Abuse Treatment (CSAT)

For a full description, refer to General Information About Mental and/or Substance Use Disorders.

HHS, SAMHSA, CSAT, Division of Pharmacologic Therapies (DPT)

This division manages the day-to-day regulatory oversight activities necessary to implement the use of opioid agonist medications, such as methadone and buprenorphrine, approved by the U.S. Food and Drug Administration for addiction treatment.

1 Choke Cherry Road, Room 2-1075 Rockville, MD 20857 240-276-2700 http://www.dpt.samhsa.gov

HHS, SAMHSA, CSAT, Knowledge Application Program (KAP)

This program provides substance use treatment professionals and consumers with publications, online education, and other resources that contain information on best treatment practices.

5515 Security Lane, Suite 800 North Bethesda, MD 20852 http://kap.samhsa.gov

HHS, SAMHSA, CSAT, Partners for Recovery Program

This initiative supports and provides technical resources to those who deliver services for the prevention and treatment of substance use conditions and co-occurring mental health and seeks to build capacity and improve services and systems of care.

http://partnersforrecovery.samhsa.gov

HHS, SAMHSA, CSAT, Recovery Community Services Program (RCSP)

This grant program awards funding to peer-topeer recovery support services that help people initiate and/or sustain recovery from alcohol and drug use disorders. Some projects also offer support to family members of people needing, seeking, or in recovery.

1 Choke Cherry Road, Room 5-1124 Rockville, MD 20857 240-276-1566

WORKPLACE

These government agencies provide resources to address mental and/or substance use disorder issues in the workplace.

HHS, SAMHSA, CSAP, Drug-Free Workplace Resource Center and Helpline

This website and helpline supplies centralized access to information about drug-free workplaces and related topics.

1 Choke Cherry Road, Room 2-1035 Rockville, MD 20857 240-276-2600

http://www.drugfreeworkplace.gov

U.S. Department of Labor (DOL)

This department provides information for U.S. job seekers, wage earners, and retirees about workplace rules and regulations.

200 Constitution Avenue NW Washington, DC 20210 866-4-USA-DOL (87-2365) http://www.dol.gov

DOL, Office on Disability Employment Policy (ODEP)

This office works closely with the Departments of Defense and Veterans Affairs, as well as the DOL's Veterans Office, to address the provision of personal recovery and employment assistance to our nation's disabled service members, including those coming back from Iraq and Afghanistan.

U.S. Department of Labor, Office on Disability Policy 200 Constitution Avenue NW Washington, DC 20210 866-ODEP-DOL (633-7365) http://www.dol.gov/odep

DOL, DisabilityInfo.gov

This comprehensive federal website provides disability-related government resources.

https://www.disability.gov

DOL, Drug-Free Workplace Advisor

This tool provides information to businesses about how to establish and maintain an alcohol- and drug-free workplace. It also provides information about the Drug-Free Workplace Act of 1988, based on the Office of Management and Budget's (OMB) Government-wide non-regulatory guidance.

http://www.dol.gov/elaws/drugfree.htm

U.S. Equal Employment Opportunity Commission (EEOC)

This commission is responsible for enforcing federal laws that make it illegal to discriminate against a job applicant or an employee because of the person's race, color, religion, sex, national origin, age, disability or genetic information.

U.S. Equal Employment Opportunity Commission 131 M Street NE Washington, DC 20507 202-663-4900 202-663-4494 (TTY) http://www.eeoc.gov

U.S. National Labor Relations Board (NLRB)

This federal agency administers the National Labor Relations Act by conducting elections to determine whether or not employees want union representation, as well as investigating and remedying unfair labor practices by employers and unions.

1099 14th Street NW Washington, DC 20570 202-273-1000 http://www.nlrb.gov

U.S. Small Business Administration (SBA)

This organization delivers loans, loan guarantees, contracts, counseling sessions and other forms of assistance to small businesses. Specifically, grantees of the Paul D. Coverdell Drug-free Workplace Program assist small businesses with the implementation of a drug-free workplace program.

409 Third Street SW Washington, DC 20416 800-827-5722 http://www.sba.gov

OTHER RESOURCES

CULTURE-SPECIFIC RESOURCES

These organizations provide mental and/or substance use disorder support services geared toward specific ethnic groups.

Arab and Middle East Resources Center (AMERC)

This nonprofit organization was founded to provide inter-culturally sensitive services to raise awareness about mental and substance use disorders. This includes public awareness and recovery support. AMERC is a member of Michigan Community Coalition for Change (MC3), which has a mission of building bridges for recovery and well-being.

313-766-8712

National Alliance of Multi-Ethnic Behavioral Health Association (NAMBHA)

This 501(c)(3) organization is composed of a myriad of diverse associations interested in the elimination of disparities in behavioral health and improving the well-being of racial/ethnic children, adults, families, and communities.

Three Bethesda Metro Center Bethesda, MD 20814 301-941-1834

http://www.nambha.org

National Minority AIDS Council (NMAC)

This 501(c)(3) organization develops leadership in communities of color to end the HIV/AIDS epidemic. NMAC has advanced this mission through a variety of programs and services, including: a public policy education program, national and regional training conferences, a treatment and research program, numerous electronic and materials.

1931 13th Street NW Washington, DC 20009 202-483-6622 http://www.nmac.org Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF) For a full description, refer to Prevention.

AFRICAN-AMERICAN

These organizations provide prevention, treatment, and recovery resources targeted toward African-American audiences.

Association of Black Psychologists

This association addresses issues facing black psychologists and the black community.

7119 Allentown Road, Suite 203 Ft. Washington, MD 20744 301-449-3082 http://www.abpsi.org

Black Administrators in Child Welfare, Inc.

This association provides help for African-American children and their families in the child welfare system.

900 Second Street NE, Suite 202 Washington, DC 20002 202-783-3714 http://www.blackadministrators.org

GROUP Ministries, Inc. For a full description, refer to Recovery Support Groups.

National Association for Equal Opportunity in Higher Education

This association represents the presidents and chancellors of diverse black colleges and universities: public, private and land-grant, two-year, four-year, graduate, and professional, historically and predominantly black colleges and universities.

209 Third Street SE Washington, DC 20003 202-552-3300 http://www.nafeo.org

National Association of African Americans for Positive Imagery

This organization mobilizes communities to live a healthy lifestyle, promote positive community and self images, and to foster environments free of health disparities.

1231 North Broad Street Philadelphia, PA 19122 215-235-6488 http://www.naaapi.org

National Association of Black Social Workers

The membership of this association includes African Americans working in social services. This association advocates for social change, justice and human development of African people here in the United States and throughout the world.

2305 Martin Luther King Avenue SE Washington, DC 20020 202-678-4570

http://www.nabsw.org

National Black Alcoholism and Addiction Council

This group is committed to educating the public about the prevention of alcohol abuse, alcoholism, and other drugs of abuse; increasing services for alcoholics and their families; providing quality care and treatment; and developing research models specifically designed for the African-American community.

1500 Golden Valley Road Minneapolis, MN 55411 877-NBAC-ORG (622-2674) http://www.nbacinc.org

National Black Child Development Institute (NBCDI)

The NBCDI provides and supports programs, workshops, and resources for African-American children, their parents, and communities in early health education, elementary and secondary health education, child welfare, and parenting.

1313 L Street NW, Suite 110 Washington, DC 20005 202-833-2220 800-556-2234 http://www.nbcdi.org

National Council of Negro Women, Inc.

This organization seeks to lead, develop and advocate for women of African descent as they support their families and communities.

633 Pennsylvania Avenue NW Washington, DC 20004 202-737-0120

http://www.ncnw.org

National Medical Association (NMA)

This association serves as the collective voice of African-American physicians and a force for parity and justice in medicine and the elimination of disparities in health.

8403 Colesville Road, Suite 920 Silver Spring, MD 20910 202-347-1895 http://www.nmanet.org

Turning Point

This organization provides services to the community to assist people in achieving wellness and to live a self-supportive lifestyle. It provides social services, public health programs and culturally-specific solutions to meet people's needs.

1500 Golden Valley Road Minneapolis, MN 55411 612-520-4004

http://www.ourturningpoint.org/about.html

ASIAN-PACIFIC ISLANDER

These organizations provide prevention, treatment, and recovery resources targeted toward Asian-Pacific Islander audiences.

Asian and Pacific Islander American Health Forum

This forum influences policy, mobilizes communities, and strengthens programs and organizations to improve the health of Asian Americans, Native Hawaiians, and Pacific Islanders.

1828 L Street NW, Suite 802 Washington, DC 20036 202-466-7772 http://www.apiahf.org

Asian Counseling and Referral Service, Inc. For a full description, refer to Recovery Support Groups.

Japanese American Citizens League

This community organization monitors and responds to issues that enhance or threaten the civil and human rights of all Americans and implements strategies to effect positive social change, particularly to the Asian Pacific American community.

San Francisco Office: 1765 Sutter Street San Francisco, CA 94115 415-921-5225

Washington Office: 1701 Pennsylvania Avenue NW, Suite 212 Washington, DC 20036 202-223-1240 http://www.jacl.org

National Asian American Pacific Islander Mental Health Association

This association aids the mental well-being of Asian Americans and Pacific Islanders when dealing with problems including substance use.

1215 19th Street, Suite A
Denver, CO 80202
303-298-7910
http://www.naapimha.org

National Asian Pacific American Families Against Substance Abuse, Inc. (NAPAFASA)

This private, nonprofit membership organization prevents and reduces substance abuse in Asian American, Native Hawaiians, and other Pacific Islander families and communities through research, advocacy, education, and capacity building.

340 East Second Street, Suite 409 Los Angeles, CA 90012 213-625-5795 http://www.napafasa.org

Organization of Chinese Americans

This organization is dedicated to advancing the social, political, and economic well-being of Asian Pacific Americans.

1322 18th Street NW Washington, DC 20036 202-223-5500 http://www.ocanational.org

HISPANIC/LATINO

These organizations provide prevention, treatment, and recovery resources targeted toward Hispanic/Latino audiences.

ASPIRA Association, Inc.

This association offers programs and activities dedicated to leadership development and education of Puerto Rican and other Latino youth.

1444 Eye Street NW, Suite 800 Washington, DC 20005 202-835-3600 http://www.aspira.org

Chicanos Por La Causa, Inc.

The community development corporation is committed to building stronger, healthier communities as a lead advocate, coalition builder and direct service provider.

1112 East Buckeye Road Phoenix, AZ 85034 602-257-0700 http://www.cplc.org

Hands Across Cultures

This organization works to improve the health, education, and well-being of the people of northern New Mexico through family-centered approaches deeply rooted in the multicultural traditions of their communities.

P.O. Box 2215 Espanola, NM 87532 505-747-1889 http://www.handsacrosscultures.org

Latin American Youth Center

This center provides outpatient counseling services for Hispanic individuals, families, and groups.

1419 Columbia Road NW Washington, DC 20009 202-319-2225 http://www.layc-dc.org

National Alliance for Hispanic Health

This organization focuses on improving the health and well-being of Hispanics.

1501 16th Street NW Washington, DC 20036 202-387-5000 http://www.hispanichealth.org

National Hispanic Medical Association (NHMA)

This organization is dedicated to empowering Hispanic physicians to be leaders who will help eliminate health disparities and improve the health of Hispanics.

1920 L Street NW, Suite 725 Washington, DC 20036 202-628-5895 http://www.nhmamd.org

National Latino Behavioral Health Association

This organization brings attention to the great disparities that exist in the areas of funding, access, and quality of care for Latino consumers and families needing professional mental health and substance abuse services.

6555 Robin Street Cochiti Lake, NM 87083 505-980-5156 http://www.nlbha.org

National Latino Children's Institute (NLCI)

This national institute focuses the nation's attention on the contributions and challenges of young Latinos by advocating for their success and well-being through partnerships and programs.

118 Broadway Street, Suite 615 San Antonio, TX 78205 210-228-9997 http://www.nlci.org

Puerto Rican Organization for Community Education and Economic Development, Inc.

This organization addresses the social, health, and economic needs of Latino and non-Latino communities.

1126 Dickinson Street Elizabeth, NJ 07201 908-351-7727 http://www.proceedinc.com

NATIVE AMERICAN

These organizations provide prevention, treatment, and recovery resources targeted toward Native American audiences.

American Indian Community House (AICH)

This organization provides health and social services for American Indians in New York City.

134 West 29th St., Fourth Floor New York, NY 10001 212-598-0100 http://www.aich.org

National Congress of American Indians (NCAI)

This organization offers assistance for tribes, tribal leaders, and youth in the prevention of, treatment of, and recovery from substance use disorders among American-Indian and Alaskan-Native families and communities.

1516 P Street NW Washington, DC 20005 202-466-7767 http://www.ncai.org

National Indian Child Welfare Association (NICWA)

This association provides training, policy, and development services to help American Indian children grow up safe, healthy, and spiritually strong.

5100 Southwest Macadam Avenue, Suite 300 Portland, OR 97239 503-222-4044 http://www.nicwa.org

National Indian Health Board (NIHB)

This organization provides health care research and services for tribes, area health boards, tribal organizations, federal agencies, and private foundations.

926 Pennsylvania Avenue SE Washington, DC 20003 202-507-4070 http://www.nihb.org

Pima Prevention Partnership For full description, refer to Recovery Support Groups.

Pinal Hispanic Council: Proyecto Bienestar (Project WellBeing) For full description, refer to Recovery Support Groups.

United National Indian Tribal Youth, Inc.

This organization develops initiatives to foster the spiritual, mental, physical, and social development of Native American youth.

500 North Broadway, Suite 10 Oklahoma City, OK 73102 405-236-2800

http://www.unityinc.org

White Bison, Inc.

This nonprofit organization disseminates culturally based principles, values, and teachings to support healthy community development and servant leadership, and to support healing from alcohol, substance abuse, co-occurring disorders, and intergenerational trauma. It offers learning resources to the Native American community nationwide on topics such as sobriety, recovery, prevention, and wellness/wellbriety.

701 North 20th Street Colorado Springs, CO 80904 877-871-1495 719-548-1000 http://www.whitebison.org

FAITH-BASED ORGANIZATIONS

These mental and/or substance use disorder organizations bring together individuals with similar religious backgrounds, and provide a faith-based component to behavioral health services.

Alcoholics Victorious

This is a Christian-oriented, 12-step support organization for those recovering from alcohol or chemical dependency. It offers information and referrals, literature, phone support, conferences, support group meetings, and a newsletter.

P.O. Box 4422 Tequesta, FL 33469 http://www.alcoholicsvictorious.org

Assistance for Substance Abuse Center

This independent foundation is dedicated to improving community health in Cincinnati and 20 surrounding counties.

Rookwood Tower 3805 Edwards Road, Suite 500 Cincinnati, OH 45202 513-458-6640 http://www.asapcenter.org

Calix Society

This is a 12-step fellowship of Catholic alcoholics who help one another maintain sobriety through Alcoholics Anonymous. The group is concerned with total abstinence, spiritual development, and sanctification of the whole personality of each member.

3881 Highland Avenue, Suite 201 St. Paul, MN 55110 800-398-0524 651-773-3117 http://www.calixsociety.org

Catholic Charities, USA

This membership association provides strong leadership and support to enhance the work of local agencies in their efforts to reduce poverty, support families, and empower communities.

2050 Ballenger Avenue, Suite 400 Alexandria, VA 22314 703-549-1390 http://www.catholiccharitiesusa.org

Celebrate Recovery

This is a worldwide Christ-centered recovery ministry. By working the 12 steps, their Biblical principles, and the corresponding 8 Recovery Principles found in the Beatitudes, individuals find freedom from past hurts and harmful addictive and dysfunctional behaviors.

1 Saddleback Parkway Lake Forest, CA 92630 949-609-8334

http://www.celebraterecovery.com

Clergy Recovery Network

This network exists to support, encourage and provide resources to religious professionals in recovery.

P.O. Box 52 Joplin, MT 59531 406-292-3322

http://www.clergyrecovery.com

Cyber Recovery Fellowship For a full description, refer to Recovery Support Groups.

Faith Partners

This organization engages and assists people of faith in the development of caring communities that promote prevention of alcohol, tobacco and other drug abuse and where recovery from addiction is valued and supported.

P.O. Box 342695 Austin, TX 78734 512-417-2307 http://www.faith-partners.org

Faith WORKS

This organization provides housing and rebuilds lives for families in need.

2825 West Street, Suite One Redding, CA 96001 530-242-1492 http://www.faith-works.cc

Interfaith Health Program, Rollins School of Public Health, Emory University

This program actively promotes the health and well-being of individuals and communities who face health disparities, and brings together a diverse community of scholars and public health practitioners to assure access to health programs and services.

1518 Clifton Road, CNR 8050 Atlanta, GA 30322 404-727-4110 http://www.interfaithhealth.emory.edu

Jewish Alcoholics, Chemically Dependent Persons and Significant Others (JACS) A Program of the Jewish Board of Family and Children Services (JBFCS)

This program's mission is to help both individuals and the Jewish community at large effectively treat and prevent addiction. JACS provides a supportive network of Jews who are successfullyin recovery, as well as the communal professionals, clergy, and educators who help them. The organization is a resource center where individuals, families, groups, and community institutions can turn for helpful, comforting guidance.

135 West 50th Street, Sixth Floor New York, NY 10020 212-632-4600 http://www.jbfcs.org/programs-services/jewishcommunity-services-2/jacs

Jewish Big Brother and Big Sister League

This league is an outpatient treatment program for adolescents, adults, and families suffering from alcohol, drug, or other addictions.

5750 Park Heights Avenue, Suite 286 Baltimore, MD 21215 800-664-3848 410-466-9200

Lutheran Services in America

This organization creates opportunities with people in thousands of communities throughout the United States and the Caribbean through more than 300 health and human service organizations connected to the Evangelical Lutheran Church in America and/or the Lutheran Church–Missouri Synod.

700 Light Street
Baltimore, MD 21230
800-664-3848
http://www.lutheranservices.org

Multifaith Works For a full description, refer to Recovery Support Groups.

National Council of Churches

The council helps parents communicate with their children about alcohol, tobacco, and illegal drugs.

475 Riverside Drive, Suite 800 New York, NY 10115 212-870-2141 http://www.ncccusa.org

Odyssey Networks

This network is the nation's largest coalition of Christian, Jewish, and Muslim faith groups dedicated to using electronic media to enrich spiritual life and build bridges of understanding among people of faith.

The Interchurch Center 475 Riverside Drive New York, NY 10115 212-870-1030

http://www.odysseynetworks.org

Overcomers In Christ (OIC)

This recovery program deals with every aspect of addiction and dysfunction (spiritual, physical, mental, emotional, and social). Members overcome obstacles using Christ-centered motivations.

P.O. Box 34460 Omaha, NE 68134 866-573-0966

http://www.overcomersinchrist.org

Overcomers Outreach, Inc.

This group provides Christ-centered, 12-step support for people with any compulsive behavior, their families, and friends. It uses the 12 steps of Alcoholics Anonymous and applies them to the Scriptures.

12828 Acheson Drive Whittier, CA 90601 800-310-3001 http://www.overcomersoutreach.org

Pathways to Promise

This organization is an interfaith technical assistance and resource center that offers liturgical and educational materials, program models, and networking information to promote a caring ministry with people with mental illness and their families. These resources are used by people at all levels of faith group structures from local congregations to regional and national staff.

5400 Arsenal Street St. Louis, MO 63139 314-877-6489 http://www.pathways2promise.org

Presbyterians for Addiction Action (PAA) Presbyterian Health, Education and Welfare Association

This association assists Presbyterians as they minister in an increasingly addictive society to restore people of the Presbyterian faith.

100 Witherspoon Street Louisville, KY 40202 800-728-7228, ext. 5580 http://www.pcusa.org/phewa/paa.htm

Recovery Consultants of Atlanta, Inc. (RCA)

This is a nonprofit, faith-based organization founded by concerned, committed, and spiritually-centered members of metro-Atlanta's recovery community. It collaborates with faith (primarily churches) and community-based organizations, develops peer-to-peer support services and programs, and works to build a network of recovering individuals.

3423 Covington Drive, Suite B
Decatur, GA 30032
404-289-0313
http://www.recoveryconsultants.org

Recovery Ministries of the Episcopal Church

This is a national membership organization that raises awareness throughout the church community about addictions and the hope of recovery from these illnesses.

P.O. Box 40764 Memphis, TN 38174 866-306-1542 http://www.episcopalrecovery.org

Salvation Army

This organization provides a broad array of social services that include providing food for the hungry, relief for disaster victims, assistance for the disabled, outreach to the elderly and ill, clothing and shelter to the homeless, and opportunities for underprivileged children.

615 Slaters Lane
P.O. Box 269
Alexandria, VA 22313
703-684-5500
http://www.salvationarmyusa.org

Save Our Selves (SOS Clearinghouse)

This organization is dedicated to providing a path to sobriety, an alternative to those paths depending upon supernatural or religious beliefs.

4773 Hollywood Boulevard Hollywood, CA 90027 323-666-4295

http://www.cfiwest.org/sos/index.htm

Seventh-Day Adventist Church

Through the Adventist Development and Relief Agency and other programs, this church operates youth camps, community service projects, family life counseling, and health and temperance programs, which include substance use disorder prevention/treatment and recovery options as a continuum.

12501 Old Columbia Pike Silver Spring, MD 20904 301-680-6000 http://www.adventist.org

Shinnyo-en Foundation

This organization helps build more caring communities by supporting educational programs that engage and inspire young people in meaningful acts of service. The foundation was established in 1994 by Shinnyo-en, a lay Buddhist order whose members strive to live with utmost sincerity and respect for others.

201 Mission Street, Suite 2230 San Francisco, CA 94105 415-777-1977 http://www.sef.org

St. Paul's Episcopal Church

This church welcomes all people who enter in peace and to offer compassionate care and voice to people who are hungry, ill, without good and safe shelter, unemployed, excluded, and in despair.

221 34th Street Newport News, VA 23607 757-247-5086 http://www.stpaulsnn.org

The Springs Rescue Mission

The mission reaches the poor and needy of Colorado Springs by providing for their physical needs while ministering restoration to their spirit, soul, and body.

Five West Las Vegas Street Colorado Springs, CO 80903 719-632-1822

http://www.springsrescuemission.org

Teen Challenge International, USA

This network provides youth, adults, and families with an effective and comprehensive Christian faith-based solution to life-controlling drug and alcohol problems in order to become productive members of society. By applying biblical principles, Teen Challenge endeavors to help people become mentally-sound, emotionally-balanced, socially-adjusted, physically-well, and spiritually-alive.

5250 North Towne Centre Drive Ozark, MO 65721 417-581-2181

http://www.teenchallengeusa.com

United Methodist Church – General Board of Church and Society of the United Methodist Church

This agency of the United Methodist Church offers faith-based substance use prevention advocacy training for local churches, as well as faith-based programs for churches to de-stigmatize addiction and provide churchwide training on substance use disorders.

100 Maryland Avenue NE Washington, DC 20002 202-488-5600 http://www.umc-gbcs.org

Volunteers of America

This is a national, nonprofit, faith-based organization dedicated to helping those in need rebuild their lives and reach their full potential. Through thousands of human service programs, including housing and health care, the group helps nearly 2 million people in more than 400 communities.

1660 Duke Street Alexandria, VA 22314 800-899-0089 703-341-5000 http://www.voa.org

FAMILY AND SOCIAL SERVICES

These organizations offer resources for the entire family, in addition to supporting the child welfare system.

Alliance for Children and Families

This alliance provides services to the nonprofit child and family sectors and economic empowerment organizations.

11700 West Lake Park Drive Milwaukee, WI 53224 414-359-1040 800-221-3726 http://www.alliance1.org

American Council for Drug Education (ACDE) For a full description, refer to Prevention.

Elks Drug Awareness Resource Center

This program is the largest volunteer drug awareness program in the country. It is committed to eliminating the use of illegal drugs by all members of its society.

2750 North Lakeview Avenue Chicago, IL 60614 773-755-4700 http://www.elks.org

Child Welfare League of America (CWLA)

This membership organization has more than 1,100 public and private nonprofit agencies promoting the well-being of children, youth, and their families, and protecting every child from harm.

1726 M Street, Suite 500 Washington, DC 20036 202-688-4200 http://www.cwla.org

Children's Defense Fund For a full description, refer to Policy.

Federation of Families for Children's Mental Health

This national parent-run organization focuses on the needs of children and youth with emotional, behavioral, or mental illness, and their families.

9605 Medical Center Drive, Suite 280 Rockville, MD 20850 240-403-1901 http://www.ffcmh.org

Intervention 911

This group works with families nationwide to bring loved ones suffering from addiction to treatment. The organization also gives family and friends the tools they need to heal during the recovery process.

170 North Vista Street Los Angeles, CA 90036 866-888-4911 http://www.intervention911.com

Kennedy Krieger Family Center

This center is dedicated to improving the lives of children and adolescents with pediatric developmental disabilities and disorders of the brain, spinal cord, and musculoskeletal system, through patient care, special education, research, and professional training.

707 North Broadway Street Baltimore, MD 21205 443-923-9200

http://www.kennedykrieger.org

National Alliance to End Homelessness

This is a nationwide coalition of public, private, and nonprofit organizations devoted to ending homelessness.

1518 K Street NW, Suite 410 Washington, DC 20005 202-638-1526 http://www.endhomelessness.org

National Alliance on Mental Illness (NAMI)
For a full description, refer to Mental Illness.

National Association for Children of Alcoholics (NACoA)

For a full description, refer to Recovery Support Groups.

National Association of Public Child Welfare Administrators (NAPCWA)

This association is committed to ensuring that children in the public child welfare system have safe, permanent homes by supporting and enhancing the system's ability to successfully implement effective programs, practices, and policies.

810 First Street NE, Suite 500 Washington, DC 20002 202-682-0100 http://www.aphsa.org/napcwa

Prevention Partnership International (PPI)

PPI is a division of Family Resources International, a 501(c)(3) nonprofit agency. The partnership develops programs that provide resources for children and families to break the cycle of addiction.

15040 Encina Court Saratoga, CA 95070 408-406-0467

http://www.preventionpartnership.us

Sigma Gamma Rho Sorority, Inc.

This sorority offers social services for communities around the nation.

1000 South Hill Drive, Suite 200 Cary, NC 27513 919-678-9720 http://www.sgrho1922.org

United Advocates for Children and Families

This is a non-profit organization that promotes the emotional, behavioral and social well-being of children, youth, and families through transformational leadership.

2035 Hurley Way, Suite 290 Sacramento, CA 95825 916-643-1530 http://www.uacf4hope.org

University of Baltimore Center for Families, Children and the Courts

This group generates policy initiatives, prepares action-oriented reports and projects, and provides educational programs that focus on relationships among parents, children, and the judiciary.

1420 North Charles Street Baltimore, MD 21201 410-837-5750 http://law.ubalt.edu/centers/cfcc

Young Men's and Young Women's Hebrew Association/92nd Street Y

This organization is a nonprofit community and cultural center that connects people at every stage of life to the worlds of education, the arts, health and wellness, and Jewish life.

1395 Lexington Avenue New York, NY 10128 212-415-5500 http://www.92y.org

Young Men's Christian Association of the U.S.A. (YMCA)

The group provides health and social services for men, women, and children.

101 North Wacker Drive Chicago, IL 60606 800-872-9622 http://www.ymca.net

Young Women's Christian Association of the U.S.A. (YWCA)

This organization offers health and social services for women and their families.

2025 M Street NW, Suite 550 Washington, DC 20036 202-467-0801

http://www.ywca.org

YOUTH M.O.V.E.

This youth-led national organization is devoted to improving services and systems that support positive growth and development. It unites the voices of individuals who have experience in various systems, including mental illness, juvenile justice, education, and child welfare.

6641 Highway 98 West, Suite 202 Hattiesburg, MS 39402 800-580-6199

http://www.youthmovenational.org

HEALTH CARE

These organizations work to increase access to health care services and provide support to provider organizations.

American Holistic Health Association (AHHA)

This association is dedicated to promoting the holistic principle of honoring the whole person (mind, body, and spirit) and encouraging people to actively participate in their own health and health care.

P.O. Box 17400 Anaheim, CA 92817 714-779-6152 http://www.ahha.org

DrugWatch

This comprehensive website database features extensive information about thousands of different medications and drugs currently on the market or previously available worldwide. By providing FDA alerts, drug interactions, and potential side effects, this site provides patients with valuable knowledge that could enhance their ability to voice concerns with their doctors and improve their quality of care.

189 S. Orange Avenue, Suite 1600 Orlando, FL 32801 800-452-0949

http://www.drugwatch.com

Families USA

This organization is dedicated to the achievement of high-quality, affordable health care for all Americans.

1201 New York Avenue NW, Suite 1100 Washington, DC 20005 202-628-3030 http://www.familiesusa.org

George Washington University Ensuring Solutions to Alcohol Problems Initiative

This program works to increase access to treatment for individuals with alcohol problems by collaborating with policymakers, employers, and concerned citizens.

2021 K Street NW, Suite 800
Washington, DC 20006
202-296-6922
http://sphhs.gwu.edu/institutescenters/ensuring_solutions_to_alcohol_problems.cfm

Haight Ashbury Free Clinics, Inc.

The mission of these clinics is to provide compassionate, integrated care that includes primary medical, mental health, and substance use disorder treatment.

1735 Mission Street San Francisco, CA 94103 415-762-3700 http://www.hafci.org

National Association of Community Health Centers (NACHC)

This association promotes the provision of high quality, comprehensive and affordable health care that is coordinated, culturally and linguistically competent, and community directed for all medically underserved populations.

7501 Wisconsin Avenue, Suite 1100W Bethesda, MD 20814 301-347-0400

http://www.nachc.com

National Association of County Behavioral Health and Developmental Disability Directors (NACBHD)

This nonprofit membership organization promotes national policies that recognize and support the critical role counties play in caring for people affected by mental illness, addiction, and developmental disabilities.

25 Massachusetts Avenue NW, Suite 500 Washington, DC 20001 202-661-8816 http://www.nacbhd.org

National Committee for Quality Assurance (NCQA)

This group provides information about the quality of the nation's managed care plans.

1100 13th Street NW, Suite 1000 Washington, DC 20005 202-955-3500

http://www.ncga.org

National Council on Patient Information and Education (NCPIE)

This multi-disciplinary coalition works together to stimulate and improve communication of information on safe and appropriate medicine use to consumers and health care professionals.

200-A Monroe Street, Suite 212 Rockville, MD 20850 301-340-3940 http://www.talkaboutrx.org

National Health Law Program

This national program protects and advances the health rights of low income and underserved individuals.

1444 Eye Street NW, Suite 1105 Washington, DC 20005 202-289-7661

http://www.healthlaw.org

Health Consumer Alliance (HCA)

This alliance is a partnership of consumer assistance programs operated by community-based legal services organizations. The Alliance's common mission is to help low-income people obtain essential health care.

2639 South La Cienega Boulevard Los Angeles, CA 90034 310-204-4900 http://www.healthconsumer.org

National Minority AIDS Council For a full description, refer to Culture-Specific Resources.

JUSTICE/LEGAL SYSTEM

These organizations provide support and resources for those involved in the criminal justice and legal systems.

American Bar Association (ABA) Standing Committee on Substance Abuse

This committee promotes justice system reform that addresses problems associated with the illegal use of drugs and alcohol in this country. To carry out this mission, the Standing Committee collaborates with other ABA entities, federal, state, and local public/private organizations, and state, local, and territorial bar associations.

740 15th Street NW Washington, DC 20005 202-662-1000

http://www.americanbar.org/groups/health_law/interest_groups/substance_abuse/publications.html

American Correctional Association (ACA)

This organization provides resources for practitioners in the correctional profession and those interested in improving the justice system.

206 North Washington Street, Suite 200 Alexandria, VA 22314 800-ACA-JOIN (222-5646) 703-224-0000 http://www.aca.org

Bazelon Center for Mental Health Law

This organization is devoted to improving the lives of people with mental illnesses through changes in policy and law.

1101 15th Street NW, Suite 1212 Washington, DC 20005 202-467-5730 http://www.bazelon.org

Center for Community Alternatives: Recovery Network of New York
For full description, refer to Recovery Support Groups.

Center for Families, Children and the Courts

This center is dedicated to improving the quality of justice and services to meet the diverse needs of children, youth, families, and self-represented litigants in the California courts.

455 Golden Gate Avenue, Sixth Floor San Francisco, CA 94102 415-865-7739 http://www.courts.ca.gov

Center on Juvenile and Criminal Justice

This center promotes a balanced and humane criminal justice system through the provision of direct services, technical assistance, and policy analysis.

40 Boardman Place San Francisco, CA 94103 415-621-5661 http://www.cjcj.org

DC Bar - Lawyers Assistance Program

Established in 1985, this is a free and confidential program assisting lawyers, judges, and law students who experience problems that interfere with their personal lives or their ability to serve as counsel or officers of the court.

1101 K Street NW, Suite 200
Washington, DC 20005
202-737-4700
http://www.dcbar.org/for_lawyers/bar_services/
counseling/index.cfm

Drug Court Clearinghouse

This group provides technical assistance for drug court programs.

Justice Programs Office, School of Public Affairs American University, Brandywine Building 4400 Massachusetts Avenue NW, Suite 100 Washington, DC 20016 202-885-2875

http://www1.spa.american.edu/justice/project.php?ID=1

International Community Corrections Association (ICCA)

This organization is dedicated to promoting community-based corrections for adults and juveniles to enhance public safety.

2100 Stella Court Columbus, OH 43215 614-420-4966 http://www.iccalive.org

The Legal Action Center (LAC)

This nonprofit law and policy organization fights discrimination against people with histories of substance use disorders, HIV/AIDS, or criminal records, and advocates for sound public policies in these areas.

225 Varick Street New York, NY 10014 800-223-4044 212-243-1313 http://www.lac.org

National Association of Drug Court Professionals (NADCP)

This association seeks to reduce substance use, crime, and recidivism by promoting and advocating for the establishment and funding of drug courts and providing for the collection and dissemination of information, technical assistance, and mutual support to association members.

1029 North Royal Street, Suite 201 Alexandria, VA 22314 703-575-9400 http://www.nadcp.org

National Council of Juvenile and Family Court Judges

The council supplies publications and information about juvenile and family courts.

P.O. Box 8970 Reno, NV 89507 775-784-6012 http://www.ncjfcj.org

National Drug Court Institute (NDCI)

This institute promotes education, research, and scholarship for drug court and other courtbased intervention programs.

1029 North Royal Street, Suite 201 Alexandria, VA 22314 703-575-9400 http://www.ndci.org

National Sheriffs' Association

This association offers crime prevention programs that help sheriffs better serve the people of their cities, counties, or jurisdictions.

1450 Duke Street Alexandria, VA 22314 800-424-7827 http://www.sheriffs.org

http://www.sheriffs.org

National Treatment Accountability for Safer Communities (TASC)

This membership organization is dedicated to the professional delivery of assessment and case management services to substance involved criminal justice and court populations.

1025 Connecticut Avenue NW, Suite 605 Washington, DC 20036 202-293-8657 http://www.nationaltasc.org

The Sentencing Project

This project conducts research on sentencing and incarceration.

1705 DeSales Street NW, Eighth Floor Washington, DC 20036 202-628-0871

http://www.sentencingproject.org

TASC, Inc. of Illinois For a full description, refer to Recovery Support Groups.

Vera Institute of Justice, La Bodega de la Familia

This institute combines expertise in research, demonstration projects, and technical assistance to help leaders in government and civil society improve the systems people rely on for justice and safety.

233 Broadway, 12th Floor New York, NY 10279 212-334-1300 http://www.vera.org

MENTAL ILLNESS

These organizations provide mental illness services and education, as well as work to increase awareness of mental illness.

ACMHA – The College for Behavioral Health Leadership

This organization is a forum for the exchange of new policy ideas that contribute to the improvement in the lives of people with mental and substance use disorders and the systems that provide treatment and prevention services.

7804 Loma del Norte Road NE Albuquerque, NM 87109 505-822-5038 http://www.acmha.org

Connecticut Department of Mental Health Addiction Services (DMHAS)

This organization is dedicated to improving the quality of life of the people of Connecticut by providing an integrated network of comprehensive, effective, and efficient mental health, and addiction services that foster self-sufficiency, dignity, and respect.

410 Capitol Avenue P.O. Box 341431 Hartford, CT 06134 800-446-7348 860-418-7000

http://www.dmhas.state.ct.us

Depression and Bipolar Support Alliance (DBSA)

This group's mission is to provide hope, help, and support to improve the lives of people living with depression or bipolar disorder. The DBSA pursues and accomplishes this mission through peer-based, recovery-oriented, empowering services and resources when people want them, where they want them, and how they want them.

730 North Franklin Street, Suite 501 Chicago, IL 60654-7225 800-826-3632

http://www.dbsalliance.org

The Family Café

This organization brings together individuals with disabilities, as well as their families, with state agencies, nonprofit organizations and other service providers, so families can network, learn what services are available, and find out the best way to access those services.

519 North Gadsden Street Tallahassee, FL 32301 850-224-4670 http://familycafe.net

Kansas Consumer Advisory Council for Adult Mental Health, Inc.

This is a consumer organization serving the geographical area of Kansas and dedicated to improving the lives of people with psychiatric disabilities. The organization is entirely made up of people who self-identify as current or former consumers of mental health services.

358 North Main Wichita, KS 67202 316-978-5842 http://kansascac.org

Mental Health America (MHA)

MHA is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With nearly 300 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service.

2000 North Beauregard Street, Sixth Floor Alexandria, VA 22311 800-969-6642 703-684-7722

http://www.mentalhealthamerica.net http://www.mentalhealthamerica.net/go/recovery

Mental Health Self-Assessment

This site is dedicated to families and service members who need a private and confidential assessment for conditions such as depression, post-traumatic stress disorder, anxiety disorder, bipolar disorder, and alcohol abuse.

http://www.militarymentalhealth.org

National Alliance on Mental Illness (NAMI)

This is a nonprofit support and advocacy organization of consumers, families, and friends of people with mental illnesses. NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raising awareness and building a community of hope for all of those in need.

3803 North Fairfax Drive, Suite 100 Arlington, VA 22203 703-524-7600 http://www.nami.org

National Association for Children of Alcoholics (NACoA)

For a full description, refer to Recovery Support Groups.

NACoA, Just 4 Kids

This resource works to eliminate the adverse impact of alcohol and drug use on children and families by working to raise public awareness and provide leadership in public policy at the national, state, and local levels.

10920 Connecticut Avenue, Suite 100 Kensington, MD 20895 888-55-4COAS 301-468-0985

http://www.nacoa.org/kidspage.htm

The National Association of State Mental Health Program Directors (NASMHPD)

This association serves as the national representative and advocate for state mental health agencies and their directors and supports effective stewardship of state mental health systems.

66 Canal Center Plaza, Suite 302 Alexandria, VA 22314 703-739-9333 www.nasmhpd.org

National Association of School Psychologists (NASP)

For a full description, refer to Provider and Professional Organizations.

NASP, Ready to Learn, Empowered to Teach

This organization empowers school psychologists by advancing effective practices to improve students' learning, behavior, and mental health.

4340 East West Highway, Suite 402 Bethesda, MD 20814 301-657-0270

http://www.nasponline.org/advocacy/readytolearn.aspx

National Coalition for Mental Health Recovery (NCMHR)

This coalition ensures that consumers/survivors have a major voice in the development and implementation of health care, mental disorder, and social policies at the state and national levels, empowering people to recover and lead a full life in the community.

1101 15th Street NW, Suite 1212 Washington, DC 20005 877-246-9058 http://www.ncmhr.org

National Consumer Supporter Technical Assistance Center at Mental Health America (MHA)

This technical assistance center at MHA strengthens mental illness consumer organizations and provider agencies by providing technical assistance in the form of research, informational materials, and training.

2000 North Beauregard Street, Sixth Floor Alexandria, VA 22311 866-439-9465

http://www.ncstac.org

National Empowerment Center (NEC)

This organization carries a message of recovery, empowerment, hope, and healing to people who have experienced mental illness, trauma, and extreme states.

599 Canal Street Lawrence, MA 01840 800-POWER2U (769-3728) http://www.power2u.org

National Mental Health Consumers' Self-Help Clearinghouse

The clearinghouse works toward the development of the mental health consumer movement, which strives for dignity, respect, and opportunity for those with mental illnesses.

1211 Chestnut Street, Suite 1207 Philadelphia, PA 19107 215-751-1810 800-553-4539 http://www.mhselfhelp.org

The Providence Center

This organization helps adults, adolescents, and children affected by psychiatric illnesses, emotional problems, and addictions by providing treatment and supportive services within a community setting.

528 North Main Street
Providence, RI 02904
401-528-0123
http://www.providencecenter.org

The Star Center

This center provides support, technical assistance and resources to improve cultural competence and diversity in the context of mental illness recovery and consumer self-help and self-empowerment.

3803 North Fairfax Drive, Suite 100 Arlington, VA 22203 866-537-STAR (7827) http://www.consumerstar.org

Suicide Prevention Resource Center Education Development Center, Inc. (SPRC)

This center provides prevention support, training, and resources to assist organizations and individuals to develop suicide prevention programs, interventions, and policies, and to advance the National Strategy for Suicide Prevention.

43 Foundry Avenue Waltham, MA 02453 877-438-7772 617-964-5448 (TTY) http://www.sprc.org

Western Psychiatric Institute and Clinic

The institute provides behavioral health services for children, families, schools, and communities.

3811 O'Hara Street Pittsburgh, PA 15213 877-624-4100 http://wpic.upmc.com/default.htm

MILITARY/VETERANS

These organizations offer support services to active military, veterans, and their families.

AMVETS

This organization provides support for veterans and the active military in procuring their earned entitlements. It also offers community services that enhance the quality of life for this nation's citizens.

4647 Forbes Boulevard Lanham, MD 20706 877-726-8387 301-459-9600 http://www.amvets.org

Center for Veterans Issues, Inc. (CVI)

This organization serves men and women of our armed forces who find themselves in need from mental and/or substance use disorders after returning to civilian life.

315 West Court Street Milwaukee, WI 53212 414-342-4284 http://www.cvivet.org

Disabled American Veterans (DAV)

This organization is dedicated to building better lives for America's disabled veterans and their families.

3725 Alexandria Pike Cold Springs, KY 41076 877-426-2838 http://www.dav.org

Iraq & Afghanistan Veterans of America (IAVA)

This organization addresses critical issues facing new veterans and their families.

292 Madison Avenue, 10th Floor New York, NY 10017 212-982-9699 http://iava.org

Mental Health Self-Assessment
For a full description, refer to Mental Illness.

National Coalition for Homeless Veterans (NCHV)

This is a 501(c)(3) nonprofit organization that serves as the resource and technical assistance center for a national network of community-based service providers and local, state, and federal agencies. These groups provide emergency and supportive housing, food, health services, job training and placement assistance, and legal aid and case management support for hundreds of thousands of homeless veterans each year.

333 ½ Pennsylvania Avenue SE Washington, DC 20003 800-VET-HELP (838-4357) http://www.nchv.org

National Veterans Foundation (NVF)

This group's mission is to serve the crisis management, information, and referral needs of all U.S. veterans and their families. It operates the nation's only toll-free helpline for all veterans and their families.

9841 Airport Boulevard, Suite 418 Los Angeles, CA 90045 310-642-0255 http://www.nvf.org

New Directions

This is a long-term drug and alcohol treatment program that provides food, shelter, and rehabilitation to homeless veterans at four Los Angeles-area locations. An estimated 27,000 homeless veterans live in Los Angeles, which is home to the country's largest Veteran's Affairs hospital. Some suffer from both mental and substance use disorders.

11303 Wilshire Boulevard, VA Building 116 Los Angeles, CA 90073 310-914-4045 http://www.newdirectionsinc.org

Swords to Plowshares

This group is committed to helping veterans break through the cultural, educational, psychological and economic barriers they often face in their transition to the civilian world.

1060 Howard Street
San Francisco, CA 94103
415-252-4788
http://www.swords-to-plowshares.org

Vet2Vet

This consumer/provider partnership program uses veterans in recovery in a peer-counseling capacity to help other veterans. Vet2Vet is administered by veterans who themselves have been consumers of VA mental illness services.

203-623-0731 http://www.vet2vetusa.org

Vets4Vets

This is a national, nonprofit veteran organization is dedicated to helping Iraq and Afghanistan-era veterans to heal from the psychological injuries of war through the use of peer support.

7030 East Broadway Blvd, Suite 230 Tucson, AZ 85710 520-393-8302

Veterans of Foreign Wars (VFW)

This organization's members mentor youth groups, help in community food kitchens, volunteer in blood drives, visit hospitalized veterans, and help veterans file compensation claims or "voice their vote" with elected officials.

406 West 34th Street Kansas City, MO 64111 816-756-3390 http://www.vfw.org

POLICY

These organizations influence mental and/or substance use disorder policy initiatives and raise awareness of behavioral health issues.

Alliance for Recovery Advocates

This organization empowers people to become advocates for recovery.

6601 Grand Teton Plaza, Suite A Madison, WI 53719 608-829-1032

http://www.waaoda.org/advocacy.html

American Council on Alcohol Problems

This federation of 37 state affiliates seeks longrange solutions to alcohol-related problems using educational and legislative approaches.

2376 Lakeside Drive Birmingham, AL 35244 205-985-9062 http://sapacap.com

American Medical Association (AMA) Office of Alcohol and Other Drug Abuse

This collaboration of the AMA and the National Institute on Alcohol Abuse and Alcoholism contains the latest information on talking to your patients about their alcohol use.

515 North State Street Chicago, IL 60654 800-621-8335 312-464-5000 http://www.ama-assn.org/ama

American Public Human Services Association (APHSA)

This association pursues excellence in health and human services by supporting state and local agencies, informing policymakers, and working with our partners to drive innovative, integrated and efficient solutions in policy and practice.

1133 19th Street NW, Suite 400 Washington, DC 20036 202-682-0100 http://www.aphsa.org/Home

Association of State and Territorial Health Officials

This association transforms public health within states and territories to help members dramatically improve health and wellness.

2231 Crystal Drive, Suite 450 Arlington, VA 22202 202-371-9090 http://www.astho.org

Capitol Decisions, Inc.

This full-service government relations and public affairs firm provides counsel in distinct issue areas, including state and local government, public works, health care, and public health.

101 Constitution Avenue NW, Suite 675 East Washington, DC 20001 202-638-0326

http://www.capitoldecisions.com

Center for Alcohol and Drug Research and Education

This international nonprofit organization provides public information and technical assistance, guidance, information, and expert service to individuals, organizations, governmental agencies, and a variety of nonprofit organizations in the private sector to improve the quality of their response to substance use disorders.

6200 North Charles Street Baltimore, MD 21212 410-377-8992

Children's Defense Fund

The non-profit child advocacy organization works to champion policies and programs that lift children out of poverty; protect them from abuse and neglect; and ensure their access to health care, quality education, and a moral and spiritual foundation.

25 E Street NW Washington, DC 20001 800-CDF-1200 http://www.childrensdefense.org

Corporation for Supportive Housing (CSH)

This organization, established in 1991, advances its mission to help communities create permanent housing to prevent and end homelessness by providing advocacy, expertise, leadership, and financial resources.

50 Broadway, 17th Floor New York, NY 10004 212-986-2966 http://www.csh.org

The Council of State Governments (CSG)

This council is our nation's only organization serving all three branches of state government. The CSG is a region-based forum that fosters the exchange of insights and ideas to help state officials shape public policy.

2760 Research Park Drive Lexington, KY 40511 859-244-8000 http://www.csg.org

Drug Free America Foundation, Inc.

This drug prevention and policy organization is committed to developing, promoting, and sustaining global strategies, policies, and laws that will reduce illegal drug use, drug addiction, drug-related injury, and death. Drug Free America Foundation is a non-governmental organization in special consultative status with the Economic and Social Council of the United Nations.

5999 Central Avenue, Suite 301 Saint Petersburg, FL 33710 727-828-0211 http://www.dfaf.org

Faces & Voices of Recovery

This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, as well as their families, friends, and allies, in campaigns to end discrimination and make recovery a reality for even more Americans.

1010 Vermont Avenue NW, Suite 618 Washington, DC 20005 202-737-0690

http://www.facesandvoicesofrecovery.org

Friends of SAMHSA

This organization engages in communication, education, and grassroots advocacy in an effort to increase awareness and advance the agenda of SAMHSA. This independent coalition is dedicated to bringing awareness to the important role that behavioral health plays in overall health. It believes that SAMHSA should be a major contributor to the formation of health policy and also seeks to work with SAMHSA's leadership to improve its dialogue with those in the field, so that in the end the consumer will benefit. This organization is not affiliated with SAMHSA.

P.O. Box 1315 Annandale, VA 22003 571-426-0297

Georgetown University, Health Policy Institute

This is a multi-disciplinary group of faculty and staff dedicated to conducting research on key issues in health policy and health services research. Institute members are engaged in diverse projects focusing on issues relating to health care financing, the uninsured, federal health insurance reforms, quality of care and outcomes research, mental illness services research, and the impact of changes in the health care market on providers and patients.

P.O. Box 571444 3300 Whitehaven Street NW, Suite 5000 Washington, DC 20057 202-687-0880 http://ihcrp.georgetown.edu

Georgetown University, Health Policy Institute, Center on an Aging Society

The center is a nonpartisan public policy institute that fosters critical thinking about the implications of an aging society and studies the impact of demographic changes on public and private institutions and families of all ages.

P.O. Box 571444 3300 Whitehaven Street NW, Suite 5000 Washington, DC 20057 202-687-0880

http://ihcrp.georgetown.edu/agingsociety

Health Matrix, Inc.

This organization develops communications programs that inform the debate on key issues in science, policy, and health care.

8300 Greensboro Drive, Suite 800 Mclean, VA 22102 703-918-4930

http://www.healthmatrixinc.com

Kaiser Family Foundation

This organization is a nonprofit, private operating foundation focusing on the major health care issues facing the nation. The foundation is an independent voice and source of facts and analysis for policymakers, the media, the health care community, and the general public.

2400 Sand Hill Road Menlo Park, CA 94025 650-854-9400 http://www.kff.org

National Association of Counties

This association offers national legislative, research, technical, and public affairs assistance for U.S. counties.

25 Massachusetts Avenue NW, Suite 500 Washington, DC 20001 202-393-6226 http://www.naco.org

National Civic League (NCL)

This is a nonprofit, nonpartisan membership organization dedicated to strengthening citizen democracy by transforming democratic institutions. It fosters innovative community building and political reform, assists local governments, and recognizes collaborative community achievements.

1889 York Street Denver, CO 80206 303-571-4343 http://www.ncl.org

National Conference of State Legislatures (NCSL)

This is a bipartisan organization that serves the legislators and staffs of the nation's 50 states, its commonwealths, and territories. It provides research, technical assistance, and opportunities for policymakers to exchange ideas on the most pressing state issues.

444 North Capitol Street NW, Suite 515 Washington, DC 20001 202-624-5400

http://www.ncsl.org

National Governors Association (NGA)

This bipartisan nonprofit association represents the collective voice of the nation's governors. Its mission is to help shape and implement national policy and help governors and their policy staff develop and implement innovative solutions to the challenges facing their states.

444 North Capitol Street, Suite 267 Washington, DC 20001 202-624-5300

http://www.nga.org

National League of Cities (NLC)

The overall purpose of the NLC is to strengthen and promote cities as centers of opportunity, leadership, and governance.

1301 Pennsylvania Avenue NW, Suite 550 Washington, DC 20004 877-827-2385 http://www.nlc.org

Parent/Professional Advocacy League (PAL)

This group provides support, education, and advocacy around issues related to children's mental illness.

45 Bromfield Street, 10th Floor Boston, MA 02018 866-815-8122 http://ppal.net

Physicians and Lawyers for National Drug Policy

This organization conducts research and provides information to the public on drug use disorders, and works to put a new emphasis on national drug policy by substantially refocusing the investment in the prevention and treatment of harmful drug use.

PLNDP National Project Office Center for Alcohol and Addiction Studies Brown University Box G-S121-4 Providence, RI 02912 401-863-6635

http://www.plndp.org

Save Our Society from Drugs

This is a legislative and congressional affairs organization that fights against permissive drug policy that negatively impacts society.

5999 Central Avenue, Suite 301 St. Petersburg, FL 33710 727-828-0211 http://www.saveoursociety.org

U.S. Conference of Mayors

This forum provides mayors with the opportunity to share ideas and recommend policy positions.

1620 Eye Street NW, Suite 400 Washington, DC 20006 202-293-7330 http://www.usmayors.org

PREVENTION

These organizations emphasize prevention of mental and/or substance use disorders through educational programs, awareness campaigns, and other materials.

Alcohol Justice

This policy-focused advocacy organization offers training and publications primarily concerned with alcohol marketing practices and counter strategies, and works closely with the World Health Organization and other groups to promote environmental prevention.

24 Belvedere Street San Rafael, CA 94901 415-456-5692 http://www.alcoholjustice.org

American Council for Drug Education (ACDE)

This substance abuse prevention and education agency develops programs and materials based on the most current scientific research on drug use and its impact on society.

50 Jay Street Brooklyn, NY 11201 800-378-4435 http://www.acde.org

Community Anti-Drug Coalitions of America (CADCA)

This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.

625 Slaters Lane, Suite 300 Alexandria, VA 22314 800-54-CADCA (542-2322) http://www.cadca.org

Campaign for Tobacco-Free Kids For a full description, refer to Schools/Youth.

FACE® Initiative

This national nonprofit organization raises awareness about the impact of substance abuse and provides realistic solutions that promote positive change.

105 West Fourth Street Clare, MI 48617 888-822-3223 989-386-2315 http://www.faceproject.org

Fetal Alcohol and Drug Unit University of Washington School of Medicine, Department of Psychiatry and Behavioral Sciences

This group is dedicated to the prevention, intervention, and treatment of fetal alcohol syndrome and fetal alcohol effects.

180 Nickerson Street, Suite 309 Seattle, WA 98109 206-543-7155 http://depts.washington.edu/fadu

Five Moms Campaign

This group of five women is spreading the word about cough medicine abuse. The campaign's mission is to have each person tell five more moms about this nationwide problem, who will then tell another five, and another five beyond that.

900 19th Street NW, Suite 700 Washington, DC 20006 202-429-9260

http://www.stopmedicineabuse.org

Leadership to Keep Children Alcohol Free Foundation

The purpose of this coalition of governors' spouses and public and private organizations is to prevent alcohol use by children between 9 and 15 years old.

2933 Lower Bellbrook Road Spring Valley, OH 45370 937-848-2993

http://www.alcoholfreechildren.org

NASPA – Student Affairs in Higher Education The Alcohol and Other Drug (AOD) Knowledge Community

This resource promotes the discussion of issues around alcohol and other drugs on student campuses, including sharing both successful and problematic practices, and the organization/planning of activities and events at regional and national meetings. The AOD Knowledge Community serves as a resource for both members of NASPA and other AOD groups.

111 K Street NE, 10th Floor Washington, DC 20002 202-265-7500

http://www.naspa.org/kc/aod/default.cfm

National Association of State Alcohol and Drug Abuse Directors (NASADAD)

This association supports the development of effective alcohol and other drug abuse prevention and treatment programs throughout every state.

1025 Connecticut Avenue NW, Suite 605 Washington, DC 20036 202-293-0090

http://www.nasadad.org

National Center for Prevention and Research Solutions (NCPRS)

This center operates a drug prevention and education program called Race Against Drugs, and has a nationwide network of volunteers and DEA/FBI agents assisting the program by conducting community and school events throughout the country.

3132 South Ridgewood Avenue South Daytona, FL 32119 86-NCPRS-NOW (62777-669) 386-760-2254

http://www.ncprs.org

National Education Association Health Information Network (NEAHIN)

This association improves the health and safety of the school community through disseminating information that empowers school professionals and positively impacts the lives of their students.

1201 16th Street NW, Suite 216 Washington, DC 20036 202-822-7570

http://www.neahin.org

National Inhalant Prevention Coalition (NIPC)

This public-private effort promotes awareness and recognition of the under-publicized problem of inhalant use. The coalition serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a week-long national grassroots education and awareness campaign.

318 Lindsay Street Chattanooga, TN 37403 800-269-4237 423-265-4662 http://www.inhalants.org

National Organization on Fetal Alcohol Syndrome (NOFAS)

This organization provides education and awareness about the prevention of birth defects caused by alcohol consumption during pregnancy.

1200 Eton Court NW, Third Floor Washington, DC 20007 202-785-4585 http://www.nofas.org

National Parent Teacher Association (PTA) Drug and Alcohol Abuse Prevention Project

This project presents drug facts, parenting tips, and family activities on protecting children from drugs and alcohol.

541 North Fairbanks Court, Suite 1300 Chicago, IL 60611 312-670-6782 http://www.pta.org

Network Addressing Collegiate Alcohol and Other Drug Issues

This network is a national organization that proactively addresses the issues of alcohol, other drugs, and violence in order to promote healthy campus environments through self-regulatory initiatives, information dissemination, and technical assistance. Member institutions encourage and enhance local, state, regional, and national initiatives through a commitment to shared standards for policy development, educational strategies, enforcement, evaluation, and community collaboration.

http://www.thenetwork.ws

The Partnership at Drugfree.org For a full description, refer to Schools/Youth.

Partnership for Prevention (PFP)

This organization seeks to create a "prevention culture" in America, where the prevention of disease and the promotion of health, based on the best scientific evidence, is the first priority for policymakers, decisionmakers, and practitioners who can make a difference in this area.

1015 18th Street NW, Suite 300 Washington, DC 20036 202-833-0009

http://www.prevent.org

Society for Adolescent Medicine

This organization offers advice for teens and parents on how to avoid alcohol and drug dependency.

111 Deer Lake Road, Suite 100 Deerfield, IL 60015 847-753-5226 http://www.adolescenthealth.org

Society for Prevention Research

This professional organization focuses on the advancement of science-based prevention programs and policies through empirical research.

11240 Waples Mill Road, Suite 200 Fairfax, VA 22030 703-934-4850

http://www.preventionresearch.org

Substance Abuse Librarians and Information Specialists (SALIS)

Established in 1978, this international association of individuals and organizations has special interests in the exchange and dissemination of alcohol, tobacco, and other drug information. SALIS holds an annual conference, publishes a quarterly newsletter, maintains a members-only listserv facilitating rapid exchanges of substance abuse information, and maintains a comprehensive list of bibliographic, statistical, and related databases covering all aspects of substance abuse.

P.O. Box 9513 Berkeley, CA 94709 510-769-1831 http://www.salis.org

Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF)

This is a nonprofit organization focused on support for prevention and treatment in Africa from alcohol and other drug problems, serving as a resource to improve the well-being of individuals, families, and communities.

1040 Main Street, Suite 103 Napa, CA 94559 609-466-8101 http://www.sapta.or.ke/home

PROVIDER AND PROFESSIONAL ORGANIZATIONS

These groups support individuals and organizations that offer health care services in an effort to enhance quality of care.

The ACTION Campaign

This campaign is a cross-sector partnership among nongovernmental organizations, foundations, and government agencies, including SAMHSA, the State Associations of Addiction Services, the Network for the Improvement of Addiction Treatment, and the National Association of State Alcohol and Drug Abuse Directors (NASADAD).

Mechanical Engineering Room 4121 1513 University Avenue Madison, WI 53706 608-265-0063

http://www.niatx.net/Action

Alcoholism and Substance Abuse Providers of New York State (ASAP)

This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.

One Columbia Place, Suite 400 Albany, NY 12207 518-426-3122 http://www.asapnys.org

American Academy of Addiction Psychiatry (AAAP)

The academy offers continuing education for substance use disorder treatment professionals.

400 Massasoit Ave, Suite 307, Second Floor Providence, RI 02914 401-524-3076 http://www.aaap.org

American Academy of Child and Adolescent Psychiatry (AACAP)

This academy provides information for AACAP members, parents, and families about the treatment of developmental, behavioral, and mental illness.

3615 Wisconsin Avenue NW Washington, DC 20016 202-966-7300

http://www.aacap.org

American Academy of Pediatrics (AAP)

This organization serves as a forum for pediatricians to address children's physical, mental, and social health needs.

141 Northwest Point Boulevard Elk Grove Village, IL 60007 847-434-4000

http://www.aap.org

American Association for Marriage and Family Therapy (AAMFT)

This association represents the professional interests of more than 25,000 marriage and family therapists throughout the United States, Canada, and abroad.

112 South Alfred Street Alexandria, VA 22314 703-838-9808 http://www.aamft.org

American Association for the Treatment of Opioid Dependence (AATOD)

This group was founded in 1984 to enhance the quality of patient care in treatment programs by promoting the growth and development of comprehensive methadone treatment services throughout the United States.

225 Varick Street, Fourth Floor New York, NY 10014 212-566-5555 http://www.aatod.org

American Association of Pastoral Counselors (AAPC)

AAPC represents and sets professional standards for more than 2,000 pastoral counselors and 75 pastoral counseling centers in North America and around the world. This association provides and promotes theologically informed, spiritually sensitive, ethically sound, and clinically competent counseling as an extension of the ministry of faith communities.

9504A Lee Highway Fairfax, VA 22031 703-385-6967 http://www.aapc.org

American Dental Association (ADA)

This group is the world's oldest and largest national dental society, representing more than 157,000 dentists throughout the United States. The ADA is committed to helping its members better identify, understand, and accommodate the special health care needs of patients with substance use disorders, and facilitating the journey of recovery for dentists and their office staffs.

211 East Chicago Avenue Chicago, IL 60611 312-440-2500 http://www.ada.org

American Legacy Foundation (Legacy)

This foundation works with those interested in decreasing the use of tobacco by Americans. Among Legacy's top priorities are to reduce tobacco use by young people and support programs that help people quit smoking. Legacy works to limit people's exposure to secondhand smoke.

1724 Massachusetts Ave, NW Washington, DC 20036 202-454-5555 http://www.legacyforhealth.org

American Medical Women's Association

This national association offers publications and information related to women's health. AMWA provides and develops leadership, advocacy, education, expertise, mentoring, and strategic alliances.

12100 Sunset Hills Road, Suite 130 Reston VA 20190 703-234-4069

http://www.amwa-doc.org

American Mental Health Counselors Association (AMHCA)

This association works exclusively for licensed mental illness counselors by advocating for legislation that expands, enhances, and protects the right to practice, promotes mental illness awareness, and builds the profession of mental illness counseling nationally. AMHCA works to enhance the profession of clinical mental health counseling through licensing, advocacy, education and professional development.

801 North Fairfax Street, Suite 304 Alexandria, VA 22314 800-326-2642 703-548-6002 http://www.amhca.org

American Psychiatric Association (APA)

This association offers mental illness information for professionals, individuals, and families.

APA member physicians work together to ensure humane care and effective treatment for all persons with mental disorders, including intellectual developmental disorders and substance use disorders

1000 Wilson Boulevard, Suite 1825 Arlington, VA 22209 888-357-7924 703-907-7300 http://www.psych.org

American Psychiatric Nurses Association (APNA)

This is a professional organization with 7,000 members committed to the specialty practice of psychiatric mental illness nursing, health promotion through identification of mental illness, prevention of mental illness, and the care and treatment of people with psychiatric disorders. APNA is a resource for psychiatric mental illness nursing and was recently named as one of American Chronicle's Top 10 Industry Associations in Nursing.

3141 Fairview Park Drive, Suite 625 Falls Church, VA 22042 855-883-2762 571-533-1919 http://www.apna.org

American Psychological Association (APA)

This organization is the largest scientific and professional organization representing psychology in the United States. Its membership includes more than 150,000 researchers, educators, clinicians, consultants, and students.

750 First Street NE Washington, DC 20002 800-374-2721 202-336-5500 http://www.apa.org

American Public Health Association (APHA)

This association influences policies and priorities to set public health practice standards and to improve health worldwide.

800 Eye Street NW Washington, DC 20001 202-777-2742 http://www.apha.org

APHA, Alcohol, Tobacco, and Other Drugs Section (ATOD)

A portion of the APHA website that offers downloadable newsletters; each year's program for the ATOD Section at the APHA Convention; and a leadership directory of email links to active members of the ATOD Section. ATOD works to develop, foster, and advocate for sound research, policy, and practice in the fields of ATOD epidemiology, prevention, and treatment.

800 Eye Street NW Washington, DC 20001 202-777-2742 http://www.apha.org/membergroups/sections/aphasections/atod

American Public Human Services Administration (APHSA)

APHSA pursues excellence in health and human services by supporting state and local agencies, informing policymakers, and working with our partners to drive innovative, integrated and efficient solutions in policy and practice.

1133 19th Street NW, Suite 400 Washington, DC 20036 202-682-0100 www.aphsa.org

American Society of Addiction Medicine (ASAM)

This is an association of 3,000 physicians nationwide dedicated to improving the treatment of alcoholism and other addictions, educating physicians and medical students, promoting research and prevention, and enlightening and informing the medical community and the public about these issues.

4601 North Park Avenue Upper Arcade, Suite 101 Chevy Chase, MD 20815 301-656-3920 http://www.asam.org

Association for Medical Education and Research in Substance Abuse (AMERSA)

This association offers training and materials for medical professionals, students, and all primary health professional disciplines. AMERSA is dedicated to improving education in the care of individuals with substance use disorders.

P.O. Box 20160 Cranston, RI 02920 401-243-8460 http://www.amersa.org

Association of State and Territorial Health Officials

For a full description, refer to Policy.

Children of Alcoholics Foundation (COAF) For a full description, refer to Family and Social Services.

Child Welfare League of America (CWLA) For a full description, refer to Family and Social Services.

Coalition of Behavioral Health Services

This collaboration of organizations and individuals in the Houston metropolitan area is working to increase awareness, provide education, and create partnerships that will help to prevent and reduce the problem and effect of alcohol, tobacco, and other drug misuse and related mental and physical health disorders.

501 Garden Oaks Boulevard Houston, TX 77018 713-426-2637, ext. 4511 http://www.cbhshouston.org

Community Intervention

This organization offers educational materials, training, and consultation for professionals working with children ages 5 to 18. Materials range from offering everything from tobacco cessation, to positive alternatives to suspension, to overcoming problems with drugs.

8014 Olson Memorial Highway, Suite 144 Minneapolis, MN 55427 800-328-0417

http://www.communityintervention.org

Drug Strategies

This organization promotes more effective approaches to the nation's drug problems and supports private and public efforts to reduce the demand for drugs through prevention, education, treatment, law enforcement, and community initiatives. The group has issued numerous reports assessing the effectiveness of various public and private substance abuse prevention efforts.

800-559-9503 202-289-9070 http://www.drugstrategies.org

Health Communications, Inc. (HCI)

Founded in 1976, this company publishes several new titles per year for professionals and consumers. It provides information and education to addiction and mental illness professionals through "Counselor, The Magazine for Addiction Professionals."

3201 SW 15th Street
Deerfield Beach, FL 33442
800-851-9100

http://www.counselormagazine.com

Institute for the Advancement of Human Behavior

This organization provides continuing medical education for mental illness, chemical dependency, and substance use disorder treatment providers in the United States and Canada.

409 Mendocino Avenue, Suite E Santa Rosa, CA 95401 800-258-8411 http://www.iahb.org

Iternational Certification & Reciprocity Consortium (IC&RC)

This organization establishes standards and facilitates reciprocity for the credentialing of addiction-related professionals. This nonprofit, voluntary membership organization is comprised of certifying agencies involved in credentialing alcohol and drug use counselors, clinical supervisors, and prevention specialists.

298 South Progress Avenue
Harrisburg, PA 17109
717-540-4457
http://internationalcredentialing.org

International Nurses Society on Addictions

This is a professional specialty organization offering education and certification for nurses interested in the advancement of excellence in nursing care for the prevention and treatment of addictions for diverse populations across all practice settings through advocacy, collaboration, education, research and policy development.

P.O. Box 14846 Lenexa, KS 66285 877-6-INTNSA (646-8672) http://www.intnsa.org

Miami Coalition for a Safe and Drug-Free Community, University of Miami/North South Center

This broadly based community organization is committed to reducing the problems of substance use disorders and directly related social issues by serving as a community convener and facilitator.

13287 Southwest 124 Street Miami, FL 33186 786-242-8222 http://www.miamicoalition.org

NAADAC, The Association for Addiction Professionals

This is a national nonprofit membership organization, with over 52 affiliates across the United States, American Territories, and internationally. It focuses on empowering addiction professionals to achieve excellence through education, advocacy, knowledge, standards of practice, ethics, and professional development and research.

1001 North Fairfax Street, Suite 201 Alexandria, VA 22314 800-548-0497 http://www.naadac.org

NALGAP, The Association of Lesbian, Gay, Bisexual, Transgender Addiction Professionals and Their Allies

This membership organization was founded in 1979 and is dedicated to the prevention and treatment of alcoholism, substance abuse, and other addictions in lesbian, gay, bisexual, transgender, and queer communities.

1001 North Fairfax Street, Suite 201 Alexandria, VA 22314 973-972-9537 http://www.nalgap.org

National Association of Addiction Treatment Providers (NAATP)

This association represents private substance use disorder treatment programs throughout the United States.

313 West Liberty Street, Suite 129 Lancaster, PA 17603 717-392-8480 http://www.naatp.org

National Association of Peer Specialists

This organization is dedicated to promoting peer specialists throughout the United States. This group of dedicated peer specialists seeks ways to spread the word about the effectiveness of education, training, hiring, and inclusion of peer specialists and peer advocates in all aspects of mental disorder and behavioral health care.

755 Alta Dale SE Ada, MI 49301 616-773-8866 http://na4ps.wordpress.com

National Association of Rural Health Clinics

This association offers information on how to improve the delivery of quality, cost-effective health care in rural, underserved areas.

Two East Main Street Fremont, MI 49412 866-306-1961 http://www.narhc.org

National Association of School Psychologists

The association provides resources focused on enhancing the mental health and educational competence of all children.

4340 East West Highway, Suite 402 Bethesda, MD 20814 301-657-0270 http://www.nasponline.org

National Association of Social Workers (NASW)

As the largest membership organization of professional social workers in the world, this organization works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies.

750 First Street NE, Suite 700 Washington, DC 20002 202-408-8600 http://www.socialworkers.org

National Association of State Medicaid Directors (NASMD)

This is a bipartisan, professional, nonprofit organization of representatives of state Medicaid agencies, affiliated with the American Public Human Services Association (APHSA). The primary purposes of this group are to serve as a focal point of communication between the states and the federal government and to provide an information network among the states on issues pertinent to the Medicaid program.

1133 19th Street NW, Suite 400 Washington, DC 20036 202-682-0100 http://www.nasmd.org

National Council for Community Behavioral Healthcare

This group is the national association of community providers who together care for more than 8 million adults and children across the country who suffer from mental illnesses, developmental disabilities, and substance use disorders. Its members employ more than 250,000 staff and provide mental and substance use disorder treatment, rehabilitation, housing, and community support services.

1701 K Street NW, Suite 400 Washington, DC 20006 202-684-7457 http://www.thenationalcouncil.org

National Inhalant Prevention Coalition (NIPC) For a full description, refer to Prevention.

Network for the Improvement of Addiction Treatment (NIATx)

This network is a partnership between the Robert Wood Johnson Foundation's Paths to Recovery program, the Center for Substance Abuse Treatment's Strengthening Treatment Access and Retention (STAR) program, NIDA, and a number of independent addiction treatment organizations. It works with treatment providers to make more efficient use of their capacity and shares strategies for improving treatment access and retention.

1513 University Avenue Mechanical Engineering, Room 4121 Madison, WI 53706 608-265-0063 http://www.niatx.net

Portland State University Graduate School of Social Work

This program offers the only graduate social work education programs in Oregon accredited by the Council on Social Work Education. The three major functions of the school are teaching, research, and community service.

P.O. Box 751
Portland, OR 97207
503-725-4712
http://www.pdx.edu/ssw/

ReStart, Inc.

This nationally accredited, full-service behavioral health care provider offers a wide range of diagnostic and treatment services tailored to meet individual needs, including community support services for adults, children, and adolescents. It offers diagnostic assessments, child and adult therapy, family and group sessions, assessments and counseling, residential treatment for girls, behavioral therapy, assertive community treatment teams, psychological evaluations, intensive in-home services, and community support teams.

2602 Courtier Drive Greenville, NC 27858 252-355-4725

http://www.restarthumanservices.com

Society for Adolescent Substance Abuse Treatment Effectiveness

This is a voluntary and informal network of researchers, evaluators, providers, and policymakers interested in pooling their knowledge and resources to improve the addiction treatment field.

301-587-1600

http://www.chestnut.org/LI/APSS/SASATE

State Associations of Addiction Services (SAAS)

This is the national organization of state provider associations representing treatment and prevention programs for substance use disorders.

236 Massachusetts Avenue NE, Suite 505 Washington, DC 20002 202-546-4600

http://www.saasnet.org

Texas Department of State Health Services Community Mental Health and Substance Abuse Services

This department works to improve the health and well-being of people living in Texas. The department built an extensive research and reference collection in the area of substance abuse prevention and treatment, which is available online.

1100 West 49th Street Austin, TX 78756 512-776-7111 http://www.dshs.state.tx.us/default.shtm

U.S. Psychiatric Rehabilitation Association (USPRA)

The USPRA and its members developed and defined the practice of psychosocial/psychiatric rehabilitation, establishing these services as integral to community-based treatment and leading the recovery movement. With nearly 1,400 members, this association seeks to advance the availability and practice of psychiatric rehabilitation so that all individuals with a serious mental illness have access to the supports they need to recover.

1760 Old Meadow Road, Suite 500 McLean, VA 22102 703-442-2078 http://www.uspra.org

RESEARCH

These organizations conduct scientific research on behavioral health conditions, as well as offer mental and/or substance use disorder training and education services.

Addiction Technology Transfer Center (ATTC) Network Coordinating Office

To advance public health and wellness, the ATTC Network accelerates lasting change in behavioral health care systems by translating, disseminating, and promoting the adoption and implementation of effective and culturally sensitive clinical practices. A list of ATTC Regional Centers, the states they serve, and contact information can be found on the ATTC Network website.

University of Missouri – Kansas City 5100 Rockhill Road Kansas City, MO 64110 816-235-6888 http://www.ATTCnetwork.org

University of Wisconsin Center for Health Enhancement Systems Studies 1513 University Ave, Rm 4120 Madison, WI 53706 816-235-6888

Central East ATTC (serving DE, DC, MD, PA, VA, WV)

8737 Colesville Road, Suite 300 Silver Spring, MD 20910 240-645-1145

http://www.attcnetwork.org/regcenters/index_centraleast.asp

Central Rockies ATTC (serving CO, MT, ND, SD, UT, WY)

Utah Addiction Center
University of Utah
410 Chipeta Way, Suite 280
Salt Lake City, UT 84108
801-581-3646
http://attcnetwork.org/regcenters/

http://attcnetwork.org/regcenters/index_centralrockies.asp

Great Lakes ATTC (serving IL, IN, MI, MN OH, WI)

Jane Addams College of Social Work University of Illinois at Chicago 1640 West Roosevelt Road, Suite 511 Chicago, IL 60608 312-996-1373

http://www.attcnetwork.org/regcenters/index_greatlakes.asp

Mid-America ATTC (serving IO, KS, MO, NE)

University of Missouri-Kansas City 5100 Rockhill Road Kansas City, MO 64110 816-235-5055

http://attcnetwork.org/regcenters/index_midamerica.asp

New England ATTC (serving CT, MA, ME, NH, RI, VT)

Center for Alcohol & Addiction Studies at Brown University 121 South Main Street Providence, RI 02903 401-863-6486

http://attcnetwork.org/regcenters/index newengland.asp

Northeast and Caribbean ATTC (serving NJ, NY, Puerto Rico, U.S. Virgin Islands)

National Development & Research Institutes, Inc. (NDRI)

71 W 23 Street, 8th Floor New York, NY 10010 212-845-4429

http://attcnetwork.org/regcenters/index_northeastcaribbean.asp

Northwest ATTC (serving AK, ID, OR, WA)

3181 Sam Jackson Park Road Portland, Oregon 97239 503-373-1322

http://www.attcnetwork.org/regcenters/index_northwest.asp

Pacific Southwest ATTC (serving AZ, CA, HI, NV, Pacific Islands)

UCLA Integrated Substance Abuse Programs 11075 Santa Monica Boulevard, Suite 100 Los Angeles, California 90025 310-267-5408

http://attcnetwork.org/regcenters/index_pacificsouthwest.asp

gulfcoast.asp

South Southwest ATTC (serving AR, TX, LA, NM, OK)

University of Texas School of Social Work Center for Social Work Research 1717 West Sixth Street, Suite 335 Austin, TX 78703 512-232-0616 http://www.attcnetwork.org/regcenters/index_

Southeast ATTC (serving AL, FL, KY, GA, MS, NC, SC, TN)

National Center for Primary Care at Morehouse School of Medicine 720 Westview Drive SW Atlanta, GA 30310 404-752-1016 http://attcnetwork.org/regcenters/ index_southeast.asp

Center for Science in the Public Interest: Alcohol Policies Project

This center conducts policy development and technical research for the prevention of alcohol use disorders at local, state, and national levels.

1220 L Street NW, Suite 300 Washington, D.C. 20005 202-332-9110

http://www.cspinet.org

Center for Substance Abuse Research

This research center provides information on substance use disorders and their impact on individuals, families, and communities.

4321 Hartwick Road, Suite 501 College Park, MD 20740 301-405-9770 http://www.cesar.umd.edu

CompassPoint Addiction Foundation

This foundation performs research about the causes and nature of substance use disorders.

P.O. Box 2800-338 Carefree, AZ 85377 480-368-2688

Harvard Medical School Division on Addictions

This center provides education and training to health care workers who treat substance use disorders and to scientists who study them.

101 Station Landing, Second Floor Medford, MA 02155 781-306-8600 http://www.divisiononaddictions.org

The Journal of Global Drug Policy and Practice

This journal is a peer-reviewed, scientific, free online publication that helps public and private entities to participate in the exchange of valuable information about drug policy and practice, while sharing different cultural attitudes and perspectives.

2600 Ninth Street North, Suite 200 St. Petersburg, FL 33704 727-828-0211 http://www.globaldrugpolicy.org

National Center on Addiction and Substance Abuse at Columbia University (CASA)

This organization is the only nationwide entity that brings together all the professional disciplines needed to study and combat the abuse of all substances – alcohol and nicotine as well as illegal, prescription, and performance-enhancing drugs – in all sectors of society.

633 Third Avenue, 19th Floor New York, NY 10017 212-841-5200 http://www.casacolumbia.org

National Development and Research Institutes, Inc. (NDRI)

This nonprofit research and educational organization is dedicated to advancing scientific knowledge in the areas of alcohol and drug use, treatment, and recovery; HIV, AIDS, and HCV; therapeutic communities; youth at risk; and related areas of public health, mental illness, criminal justice, urban problems, prevention, and epidemiology.

71 West 23rd Street, Eighth Floor New York, NY 10010 212-845-4400 http://www.ndri.org

Physicians and Lawyers for National Drug Policy For a full description, refer to Policy.

The Robert Wood Johnson Foundation (RWJF)

This foundation offers grants for training, education, and research. RWJF works to improve the health and health care of Americans by helping society transform itself for the better.

P.O. Box 2316 College Road East and Route 1 Princeton, NJ 08543 877-843-7953 http://www.rwjf.org

Substance Abuse and Mental Health Data Archive (SAMHDA)

This data archive contains substance use disorder and mental illness research data. SAMHDA promotes the access and use of SAMHSA's substance abuse and mental health data by providing public-use data files and documentation for download and online analysis tools to support a better understanding of this critical area of public health.

ICPSR University of Michigan Institute for Social Research P.O. Box 1248 Ann Arbor, MI 48106 888-741-7242 http://www.icpsr.umich.edu/SAMHDA

The Urban Institute

This institute conducts economic and social policy research on a range of issues, including substance use disorders, health insurance, and community-based health care.

2100 M Street NW Washington, DC 20037 202-833-7200 http://www.urban.org

SCHOOLS/YOUTH

These organizations provide mental and/or substance use disorder education and support to youth, parents, and educators.

4-H

Healthy lifestyle education and activities for youth are presented through a program managed nationally by the families, 4-H, and Education and Extension Service of the U.S. Department of Agriculture.

1400 Independence Avenue SW, Stop 2225 Washington, DC 20250 202-401-4114 http://www.4-h.org

AnswersForTeens.com

This website provides information for teenagers seeking help if they are living with a parent who may be abusing alcohol/drugs. It provides information, helps teenagers think through their problems with their parents, and outlines places where teenagers can go for help. It builds off of Edith Lynn Hornik-Beer's book, "For Teenagers Living With a Parent Who Abuse Alcohol/Drugs."

http://www.answersforteens.com

Association of Recovery Schools (ARS)

This organization advocates for the promotion, strengthening, and expansion of secondary and post-secondary programs designed for students and families committed to achieving success in both education and recovery. ARS exists to support such schools which, as components of the recovery continuum of care, enroll students committed to being abstinent from alcohol and other drugs and working a program of recovery.

1231 Highland Avenue Fort Washington, PA 19034 215-628-8600 http://www.recoveryschools.org

Augsburg College's StepUP Program

This program provides ongoing support to students in recovery who are willing and able to progress toward an academic degree through separate chemical-free housing, weekly individual support meetings, and community activities.

2211 Riverside Avenue South Minneapolis, MN 55454 612-330-1405 http://www.augsburg.edu/stepup

Big Brothers/Big Sisters of America

This youth mentoring organization helps at-risk youth overcome the many challenges they face.

230 North 13th Street Philadelphia, PA 19107 215-567-7000 http://www.bbbsa.org

Boy Scouts of America

This group offers character development programs and leadership training for boys.

P.O. Box 152079 Irving, TX 75015 972-580-2000

http://www.scouting.org

Boys and Girls Clubs of America

This organization provides opportunities for recreation and companionship for children at home with no adult care or supervision.

1275 Peachtree Street NE Atlanta, GA 30309 404-487-5700 http://www.bgca.org

Camp Fire USA

This group offers services in areas such as youth leadership, self-reliance, after-school groups, camping, and environmental education.

1100 Walnut Street, Suite 1900 Kansas City, MO 64106 816-285-2010 http://www.campfireusa.org

Campaign for Tobacco-Free Kids

This campaign works to protect children from tobacco use and exposure to secondhand smoke.

1400 Eye Street NW, Suite 1200 Washington, DC 20005 202-296-5469 http://www.tobaccofreekids.org

Community Alliances for Drug-Free Youth, Inc. (CADFY)/Californians for Drug-Free Youth

Through community mobilization, CADFY co-develops and provides effective and comprehensive youth, adult, and family prevention/intervention/treatment and recovery community support services.

1010 Second Avenue, Suite 1900 San Diego, CA 92101 619-557-5753 http://www.cadfy.org

Connecticut Turning to Youth and Families (CTYF)

This is a statewide organization established to strengthen prevention, treatment, and recovery support services for youth and families. Using the power of youth and families with their own stories, this organization offers peer-to-peer programs and services that are natural recovery supports for other youth and families.

860-838-3553

http://www.ctyouthandfamilies.org/landing

Drug Abuse Resistance Education (D.A.R.E)

This program is a police officer-led series of classroom lessons that teaches children from kindergarten through 12th grade how to resist peer pressure and live productive drug- and violence-free lives.

P.O. Box 512090 Los Angeles, CA 90051 800-223-DARE (3273) http://www.dare.org

Drug Free America Foundation, Inc.

This is an international drug policy and prevention organization. DFAF is committed to developing, promoting, and sustaining global strategies, policies, and laws that will reduce illegal drug use, drug addiction, drug-related injury, and death.

5999 Central Avenue, Suite 301 St. Petersburg, FL 33710 727-828-0211 http://www.dfaf.org

Girl Scouts of the USA

The Girl Scouts are dedicated to helping all girls everywhere build character and gain skills for success in the real world.

420 Fifth Avenue New York, NY 10018 800-478-7248 212-852-8000 http://www.girlscouts.org

Junior Achievement

This organization educates and inspires young people to value free enterprise, business, and economics.

One Education Way Colorado Springs, CO 80906 719-540-8000 http://www.ja.org

La Joya ISD

This independent school district in La Joya, TX, offers programs and counseling for substance use prevention, education, and intervention.

201 East Expressway 83 La Joya, TX 78560 956-323-2002 http://www.lajoyaisd.com

MENTOR/National Mentoring Partnership

This group is widely acknowledged as the nation's premier advocate and resource for the expansion of mentoring initiatives nationwide. MENTOR leverages resources and provides the support and tools that mentoring organizations need to effectively serve young people in their communities.

201 South Street, Sixth Floor Boston, MA 02211 617-203-2151 http://www.mentoring.org

National Parent Teacher Association (PTA)
Drug and Alcohol Abuse Prevention Project
For a full description, refer to Prevention.

Network on Transitions to Adulthood

This group, supported by the John D. and Catherine T. MacArthur Foundation, examines the changing nature of early adulthood (ages 18-34), and the policies, programs, and institutions that support young people as they move into adulthood.

University of Pennsylvania Department of Sociology 3718 Locust Walk Philadelphia, PA 19104 215-898-1569 http://www.transad.pop.upenn.edu

Parents 4 A Change

This website works to raise awareness about the use of opiates and heroin among teenagers.

http://www.parents4achange.com

The Partnership at Drugfree.org

This nonprofit organization helps parents prevent, intervene in, and find treatment for drug and alcohol use by their children. Bringing together renowned scientists, parent experts, and communications professionals, this public health nonprofit translates current research on teen behavior, parenting, addiction, and treatment into easy-to-understand resources at http://www.drugfree.org. The organization also reaches families through its community education programs, which focus on local drug and alcohol issues of concern for parents, youth, and the Hispanic community.

352 Park Avenue South, Ninth Floor New York, NY 10010 212-922-1560 http://www.drugfree.org

ittp://www.aragiree.org

Reclaiming Futures

This initiative created by the Robert Wood Johnson Foundation (RWJF), housed in the Regional Research Institute, School of Social Work at Portland State University, offers a proven approach to helping teenagers caught in the cycle of drugs, alcohol, and crime. In 37 communities across the nation, the program has received investments from RWJF, the Office of Juvenile Justice and Delinquency Prevention, SAMHSA's Center for Substance Abuse Treatment, the Kate B. Reynolds Charitable Trust, and the Duke Endowment.

Portland State University – RRI P.O. Box 751 Portland, OR 97207 503-725-8911 http://www.reclaimingfutures.org

Students Against Destructive Decisions (SADD)

This organization provides students with peerto-peer education, prevention, and activism organization dedicated to preventing destructive decisions, particularly underage drinking, other drug use, risky and impaired driving, teen violence, and teen suicide.

255 Main Street Marlborough, MA 01752 877-SADD-INC (7233-462) http://www.sadd.org

Students Taking Action Not Drugs (STAND)

This college-level substance abuse prevention marketing program educates students about the dangers of addictive drugs and mobilizes them to reduce substance use on their campuses.

5999 Central Avenue, Suite 301 St. Petersburg, FL 33710 727-828-0211 http://www.studentstakingaction.org

U-Turn of SAARA, Inc.

This organization is dedicated to empowering disadvantaged people, especially youth, to improve their lives, thus enabling them to improve their communities and ultimately society in Virginia.

306 Turner Road, Suite P Richmond, VA 23225 804-762-4445 http://www.saaracenter.org

TREATMENT/RECOVERY

These organizations are focused on providing treatment and/or recovery resources, support, and services to individuals with mental and/or substance use disorders, as well as their families.

About Recovery

This website offers recovery resources and provides a national helpline that is available 24 hours a day.

877-345-3370 http://www.aboutrecovery.com

Addiction Survivors

This group is dedicated to providing online peer support communities for those with addiction, their families, and friends.

http://www.addictionsurvivors.org

Addiction Treatment Centers

This website offers information about drug treatment centers, rehab programs, and dual diagnosis treatment resources, including blogs, forums, video sharing, and a comprehensive directory of more than 11,000 treatment facilities.

356 Santana Row San Jose, CA 95128 800-610-4673 http://www.treatment-centers.net

Addiction Treatment Watchdog

This website is a resource for educating medication-assisted treatment patients and others about the disease and treatment of opiate addiction.

http://atwatchdog.lefora.com

Advocates for Recovery Through Medicine (ARM)

This organization's goals are to end stigma and discrimination against people who use medications to treat addictions and to move addiction treatment, especially opiate treatment, into mainstream medicine.

P.O. Box 90337 Burton, MI 48509 810-250-9064

Advocates for the Integration of Recovery and Methadone (AFIRM)

This group supports methadone as an effective tool of recovery that can be enhanced through the integration of other treatment approaches. It promotes the development of Methadone Anonymous (MA) and other 12-step fellowships, as well as clinical treatment alternatives, such as incorporating spirituality modalities into traditional treatment settings.

455 East Bay Drive Long Beach, NY 11561 888-638-4786 516-897-1330 (Days) 516-889-8142 (Evenings) http://www.afirmfwc.org

The Alexandria Community Services Board (CSB)

This group provides effective and cost-efficient mental illness, mental retardation, and substance use prevention and treatment services that measurably improve the quality of life for Alexandria, VA's neediest citizens.

720 North Saint Asaph Street, Fourth Floor Alexandria, VA 22314 703-746-3400 http://www.alexandriava.gov/CSB

Aliviane NO-AD, Inc.

This nonprofit community-based organization has developed a broad range of prevention, intervention, and treatment programs in the areas of substance abuse, behavioral health, and education. Aliviane also coordinates a strong network of community support and an array of interagency agreements to provide a continuum of care in West Texas.

P.O. Box 371710 El Paso, Texas 79937 915-782-4000 http://www.aliviane.org

The American Association of Poison Control Centers (AAPCC)

This association is a nationwide organization of poison centers and represents interests of poison prevention and treatment of poisoning.

515 King Street, Suite 510 Alexandria, VA 22314 703-894-1858 http://www.aapcc.org

Association of Recovery Schools (ARS)
For full description, refer to Schools/Youth.

Elks Drug Awareness Resource Center For a full description, refer to Family and Social Services.

C4 Recovery Solutions, Inc.

This nonprofit was established to promote the design, provision, and monitoring of outcomesbased services that initiate and sustain recovery from substance use disorders, as well as improve prevention and harm reduction strategies that mitigate addiction's effects.

P.O. Box 313
Tryon, NC 28782
http://www.c4recoverysolutions.org

California Association of Addiction Recovery Resources (CAARR)

This nonprofit membership organization serves as the principle voice for social model recovery programs throughout California. Services to members include advocacy for social model programs at the federal, state and local levels of government, as well as in the community.

2400 Marconi Avenue P.O. Box 214127 Sacramento, CA 95821 916-338-9460 http://www.caarr.org

Community Connections, Inc.

This group is the largest not-for-profit mental illness agency serving men, women, and children in the nation's capital. Community Connections combines a commitment to quality mental illness care with a passion for research and education that has led to its status as a recognized national leader in the delivery of creative and constantly evolving, evidence-based services for consumers and the community.

801 Pennsylvania Avenue SE, Suite 201 Washington, DC 20003 202-546-1512 http://www.communityconnectionsdc.org

Exponents, Inc.

This organization is dedicated to improving the quality of life of individuals affected by drug addiction, incarceration, and HIV/AIDS. Programs are designed to support successful life transitions through engagement in services that ignite hope and promote awareness.

151 West 26th Street, Third Floor New York, NY 10001 212-243-3434 http://www.exponents.org

Faces & Voices of Recovery For a full description, refer to Policy.

Griffin Recovery Enterprises

This enterprise consists of books, presentations, and a blog. Griffin's latest book, "A Man's Way Through the Twelve Steps," uses interviews with men in various stages of recovery, along with his own experience, to offer a holistic approach to sobriety for men.

4549 Park Avenue Minneapolis, MN 55407 612-701-5842 http://www.dangriffin.com

Hope Networks

This group supports community efforts regarding treatment, job skills, living skills, and retraining programs to reduce poverty, crime, and illiteracy found in untreated communities.

8867 Highland Road, Suite 320 Baton Rouge, LA 70808 866-859-3513 http://www.hopenetworks.org

In the Rooms, Inc.

This social networking website is for the recovery community worldwide. Its mantra is H.I.T.C.H. – Help, Inform, Touch, Connect, and Heal – for those already in recovery, seeking recovery, and family and friends around the world.

http://www.intherooms.com

The McShin Foundation

This foundation is Virginia's fastest growing peer-to-peer recovery community organization. Founded in 2004, this nonprofit is committed to serving individuals and families in their fight against substance use disorders.

2300 Dumbarton Road Richmond, VA 23228 804-249-1845 http://www.mcshinfoundation.org

Medical Assisted Treatment of America

This website aims to raise awareness and understanding of substance use, the problems it creates, and the ways to deal with these problems.

770-428-0871

http://www.medicalassistedtreatment.org

Methadone Support Organization (MSO)

This group is a support organization for medically assisted treatment available for people addicted or dependent on opiates for any reason. Its providerand patient-friendly online support resources include information on methadone and pregnancy, Methadone Anonymous, support forums, on-site experts to answer questions, and more.

http://www.methadonesupport.org/board.html

Minnesota Department of Human Services Alcohol and Drug Abuse Division

This department develops and maintains an effective chemical health service system in Minnesota that encourages and supports research-informed practices surrounding substance use disorders.

651-431-2000

http://www.dhs.state.mn.us

National Alliance for Medication Assisted Recovery (NAMA Recovery)

This is a membership organization representing people whose recovery from opiate dependence is assisted with medication. Its membership includes methadone patients, family members, and health care professionals whose common goal is to fight the ignorance and prejudice surrounding medication-assisted recovery.

435 Second Avenue New York, NY 10010 212-595-NAMA (6262) http://www.methadone.org

National Alliance of Advocates for Buprenorphine Treatment (NAABT)

This nonprofit organization has the mission to educate the public about the disease of opioid addiction and the buprenorphine treatment option, to help reduce discrimination associated with patients with addiction disorders, and to serve as a conduit for connecting patients in need of treatment to qualified treatment providers.

P.O. Box 333 Farmington, CT 06034 http://www.naabt.org

National Association on Alcohol, Drugs and Disability, Inc. (NAADD)

This association promotes awareness and education about substance use disorders among people with physical, sensory, cognitive, and developmental disabilities.

2165 Bunker Hill Drive San Mateo, CA 94402 650-578-8047 http://www.naadd.org

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)

Founded in 1944, NCADD and its Affiliate Network is a voluntary health organization dedicated to fighting the nation's #1 health problem – alcoholism, drug addiction, and the devastating consequences of alcohol and other drugs on individuals, families, and communities. NCADD focuses on increasing public awareness and understanding of the disease of alcoholism and drug dependence through education, prevention, information/referral, intervention, treatment services, advocacy, and recovery support services, and has helped millions of individuals and family members into recovery.

217 Broadway, Suite 712 New York, NY 10007 800-NCA-CALL (Hope Line) (622-2255) 212-269-7797 http://www.ncadd.org

National Council on Alcoholism and Drug Dependence – Greater Detroit Area (NCADD-GDA)

This council provides effective alcohol and drug abuse intervention, prevention, and treatment services to children and adults with substance use disorders in the Detroit area.

2400 East McNichols Detroit, MI 48212 313-868-1340 http://www.ncadd-detroit.org

National Council on Alcoholism and Drug Dependence – New Jersey, Inc. (NCADD-NJ): Friends of Addiction Recovery-New Jersey (FOAR-NJ)

This organization promotes recovery and builds leadership skills and capacity in the recovery community.

360 Corporate Boulevard Robbinsville, NJ 08691 609-689-0599 http://www.ncaddnj.org

New York State Office of Alcoholism and Substance Abuse Services

This organization works to improve the lives of residents of New York by leading a system of addiction services through prevention, treatment, and recovery.

1450 Western Avenue Albany, NY 12203 518-473-3460 http://www.oasas.ny.gov

North Carolina Department of Health and Human Services –

Division of Mental Health

Developmental Disabilities and Substance Abuse

This office is primarily responsible for leadership, guidance, and management of relationships with the local management entities who contract directly for addiction treatment services. It also collaborates with a wide variety of public and private partners and customers to promote recovery through the adoption of recovery-oriented systems of care and the promotion of a reduction to barriers to services.

325 North Salisbury Street
Albemarle Building
Suite 679
Raleigh, NC 27603
919-733-4534

http://www.dhhs.state.nc.us/MHDDSAS

Oxford House, Inc.

This is the umbrella organization for a network of more than 1,200 democratically run, self-supporting, and drug-free group homes throughout the country.

1010 Wayne Avenue, Suite 300 Silver Spring, MD 20910 800-689-6411 301-587-2916 http://www.oxfordhouse.org

Partnership for a Drug-Free NC, Inc.

This partnership coordinates statewide resources and provides services to reduce the negative impact of substance use and mental illness on North Carolina's individuals, families, and communities.

665 West Fourth Street Winston-Salem, NC 27101 800-758-6077 336-725-8389 http://www.drugfreenc.org

Partnership for Recovery (PFR)

This coalition includes the Betty Ford Center, Bradford Health Systems, Cumberland Heights, Father Martin's Ashley, Gateway Rehabilitation Center, Hazelden Foundation, and Valley Hope Association. PFR has worked to increase education and awareness of addictive disease among members of Congress and the public and eliminate barriers to treatment for the 22 million Americans struggling with addiction

101 Constitution Avenue NW, Suite 675 East Washington, DC 20001 202-737-8167

http://www.partnershipforrecovery.org

Pennsylvania Department of Health Bureau of Drug and Alcohol Programs

This state government agency develops and implements a comprehensive health, education, and rehabilitation program for the prevention, intervention, treatment, and case management of substance use disorders.

02 Kline Plaza, Suite B Harrisburg, PA 17104 717-783-8200 http://www.health.state.pa.us/bdap

PRO-ACT

This grassroots recovery support initiative in southeastern Pennsylvania (Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties) has provided prevention, intervention, and recovery support services, as well as education and advocacy to the community for 11 years. It has been providing a growing matrix of peer-to-peer support services, which has led to the opening of three recovery community centers, now a hub for all recovery services.

252 West Swamp Road, Suite 12 Doylestown, PA 18901 800-221-6333 215-345-6644 http://www.proact.org

The Providence Center
For a full description, refer to Mental Illness.

Psychology Today

This organization is dedicated to helping people understand their behavioral health disorder, the issues behind it, and how to overcome the challenge. It has gathered renowned academics, psychiatrists, psychologists and authors in our field to contribute their thoughts and ideas.

115 East 23rd Street, Ninth Floor New York, NY 10010 212-260-7210 http://www.psychologytoday.com

Recovery Works

This group offers resources for recovery from various forms of addiction.

http://www.recoveryworks.info

The Second Road, Inc.

This is a 24-hour, web-based, nonprofit group to help those in recovery (and the families of those affected by addiction) learn to live with the challenges presented by everyday life and continue on a fulfilling road of recovery. The site offers a community of trust and understanding, inspiring stories from people of diverse cultures and backgrounds, the knowledge of many experts in the addiction treatment field, and the tools to resist relapse in a secure, non-threatening environment.

609 East High Street Charlottesville, VA 22902 434-295-9595

State Associations of Addiction Services (SAAS)

For a full description, refer to Provider and Professional Organizations.

The T.A. LIBBY Group

This group provides addiction science education and recovery advocacy through published work, continuing education workshops, conference presentations, and visibility events.

2003 Tundra Court Annapolis, MD 21401 443-822-6791 http://www.talibby.com

Vera Institute of Justice, La Bodega de la Familia For a full description, refer to Justice/ Legal System.

TREATMENT/RECOVERY: EDUCATION

These organizations help to inform individuals, families, and/or the public about mental and substance use disorders.

A&E Network

Inspired by the overwhelming response to its Emmy-nominated series "Intervention," this television network created "The Recovery Project," a multi-year campaign designed to generate widespread awareness that addiction is a treatable disease and recovery is possible.

http://www.therecoveryproject.com

American Council on Alcoholism (ACA)

This group is dedicated to educating the public about the effects of alcohol, alcoholism, alcohol abuse, and the need for prompt, effective, readily available, and affordable alcoholism treatment.

1000 East Indian School Road, Suite B Phoenix, AZ 85014 800-527-5344 http://www.aca-usa.com

Board of Cooperative Educational Services – Capital Region

This organization provides educational leadership, services and support to meet the needs of our students and school districts in Albany, Schoharie, Schenectady and Saratoga counties of New York State.

900 Watervleit-Shaker Road, Suite 102 Albany, NY 12205 518-862-4900 http://www.capregboces.org

Boston University Center for Psychiatric Rehabilitation

The Center is a research, training, and service organization dedicated to improving the lives of people who have psychiatric disabilities.

940 Commonwealth Avenue West Boston, MA 02215 617-353-3549 http://www.bu.edu/cpr

Boston University School of Medicine (BUMC)

The school provides summaries of the latest clinically relevant research on alcohol and health, particularly in the area of health disparities.

The newsletter, "Alcohol and Health: Current Evidence," is published by BUMC.

801 Massachusetts Avenue, Second Floor Boston, MA 02118 617-638-5300 http://www.bu.edu/act/alcoholandhealth/

http://www.bu.edu/act/alcoholandhealth/index.html

Boston University School of Public Health

This school works to improve the health of local, national, and international populations, particularly the disadvantaged, underserved, and vulnerable, through excellence and innovation in education, research, and service.

715 Albany Street Boston, MA 02118 617-638-4640 http://www.sph.bu.edu

Connecticut Clearinghouse

This organization serves as Connecticut's resource center for information about alcohol, tobacco, drugs, and related issues.

334 Farmington Avenue Plainville, CT 06062 800-232-4424 860-793-9791(TTY) http://www.ctclearinghouse.org

Discover Films

This company produces award-winning health and educational videos for students, educators, and group leaders. Video topics include alcoholism or drug abuse, tobacco use and addiction, decision skills, and other issues.

P.O. Box 1589 Ojai, CA 93024 504-450-3976 http://www.discover-films.com

DrugAlert.org

This comprehensive database features information and news alerts about potentially dangerous drugs currently on the market or previously available worldwide. The website is dedicated to keeping the public informed about drug recalls, side effects, and pending litigation associated with various drugs and their manufacturers.

http://www.drugalert.org

Drug Strategies

This group develops publications and programs focused on effective approaches to the nation's drug problems. It publishes a guide to treating youth with substance use disorders titled "Treating Youth: A Guide to Adolescent Drug Programs."

1616 P Street NW, Suite 220 Washington, DC 20036 800-559-9503 202-289-9070

http://www.drugstrategies.org

Entertainment Industries Council, Inc. (EIC)

This nonprofit organization works within the film, television, and music industries to promote the accurate depiction of health and social issues in entertainment productions.

EIC East Coast:

1856 Old Reston Avenue, Suite 215 Reston, VA 20190 703-481-1414 http://www.eiconline.org

EIC West Coast:

111 First Street, Suite 301 Burbank, CA 91502 818-861-7782

Join Together at the Partnership at Drugfree.org

This national resource for communities working to reduce substance use disorders offers a comprehensive website, daily news updates, publications, and technical assistance.

352 Park Avenue South, Ninth Floor New York, NY 10010 212-922-1560

http://www.drugfree.org/join-together

Mental Help, Educate and Advocate

This website is a compilation of information gathered by members of the Massachusetts Department of Mental Health (DMH) Southwest Suburban Site Board. Its mission is to learn about, educate, and advocate for all people living with mental illness.

http://www.mentalhelpinfo.org

National Association of Attorneys General (NAAG)

This association offers information about statewide tobacco settlements. The NAAG was founded in 1907 to help Attorneys General fulfill the responsibilities of their office and to assist in the delivery of high quality legal services to the states and territorial jurisdictions.

2030 M Street NW, Eighth Floor Washington, DC 20036 202-326-6000 http://www.naag.org

National Association for Medication Assisted Recovery (NAMA Recovery)

This organization is composed of medicationassisted treatment patients and health care professionals who are supporters of quality opiate agonist treatment. The primary objective of NAMA Recovery is to advocate for the patient in treatment by destigmatizing and empowering medication-assisted treatment patients.

MARS Center at Port Morris Wellness Center 435 Second Avenue New York, NY 10010 212-595-NAMA http://www.methadone.org

Odyssey Networks

This network is the nation's largest coalition of Christian, Jewish, and Muslim faith groups dedicated to achieving interfaith understanding through the production and distribution of media.

475 Riverside Drive New York, NY 10115 212-870-1030

http://www.odysseynetworks.org

OpenMindsOpenDoors

This initiative is aimed at ending discrimination against people with mental illness and is coordinated by the Mental Health Association in Pennsylvania. The campaign is centered on educating the public about mental illness and the legal rights of people living with a mental illness.

c/o MHAPA 1414 North Cameron Street, First Floor Harrisburg, PA 17103 717-346-0549 http://www.openmindsopendoors.com

Pressing the Issue

This site's goal is to educate people about the ins and outs of the problems of drug addiction and diseases associated with using drugs.

http://www.pressingtheissue.com

Reach Out Recovery/Rehab Productions

This organization's goal is to help lift the stigma of addiction and carry the message of hope for recovery to restore lives of everyone affected by addiction and positively impact communities worldwide.

http://reachoutrecovery.com

Recovery Living Network

This global communications network focuses on addiction recovery and prevention, using the power of personal experience, celebrity influence, and mass media communication to help individuals when alcohol, drugs, or other excessive behaviors have become a problemin their lives. Its mission is to remove misconceptions from the public psyche to change the perception and image of addiction by talking about it openly and honestly, and by sharing personal stories of hope and inspiration.

http://www.recoveryliving.com

RecoveryNC

Initiated in September 2008 to coincide with the celebration of **Recovery Month**, this campaign allows North Carolinians in recovery to emerge together, along with their families, friends, advocates, and the treatment and recovery provider community.

919-802-7972 http://www.recoverync.org

ReNew Media, LLC

This is a multi-media company that serves the addiction recovery community. Currently, the company delivers its content through various digital and print means, including its website, reneweveryday.com, mobile applications, social media and its national print magazine, "Renew."

2030 West Barry Avenue Chicago, IL 60618 773-883-4474 http://www.reneweveryday.com

Talk Therapy Television

Talk Therapy Television, Inc. (Talk Therapy TV) is a private, not-for-profit organization that produces and broadcasts weekly television programming dedicated to promoting behavioral health awareness, treatment, and recovery. Additionally, Talk Therapy TV promotes creative and innovative ideas that generate public dialogue and discussion, and reduce the stigma associated with these disorders.

9521 106th Street Ozone Park, NY 11416 631-780-2807 http://www.talktherapytv.org

Wisconsin Clearinghouse for Prevention Resources

The clearinghouse provides substance use prevention resources for youth, parents, schools, and communities.

University Health Services, UW-Madison 333 East Campus Mall, Room 8201 Madison, WI 53715 800-248-9244 608-262-9157

http://www.wiclearinghouse.org

TREATMENT/RECOVERY: RECOVERY SUPPORT GROUPS

These organizations include peer-to-peer organizations, mutual support groups, and/or counseling services that offer support to individuals recovering from mental and substance use disorders.

16 Steps of Discovery and Empowerment

This group offers support for a wide variety of quality of life issues, such as addiction, codependency, abuse, and empowerment.

16 Steps focuses on a positive approach to help members celebrate personal strengths, stand up for themselves, heal physically, express love, and see themselves as part of the entire community, not just the recovery community.

P.O. Box 1302 Lolo, MT 59847 406-273-6080 http://www.charlottekasl.com

Abraham Low Self-Help System (ALSHS)

These meeting groups are safe places to talk about life's struggles with others who have experienced similar struggles in their lives.

105 West Adams Street, Suite 2940 Chicago, IL 60603 866-221-0302

http://www.lowselfhelpsystems.org

Adult Children of Alcoholics (ACA) World Service Organization (WSO)

This is a 12-step, 12-tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Members meet with each other in a mutually respectful, safe environment and acknowledge common experiences.

P.O. Box 3216 Torrance, CA 90510 562-595-7831 http://www.adultchildren.org

AIDS Service Center of New York City

This organization's comprehensive programs include state-of-the-art peer education and training, harm reduction, specialized women's services, HIV counseling and testing, mental illness services, medical and holistic care, case management, support groups, and many other innovative programs that help New York City's most vulnerable individuals and families to survive and thrive in the face of HIV/AIDS.

41 East 11th Street, Fifth Floor New York, NY 10003 212-645-0875 http://www.ascnyc.org

Al-Anon/Alateen

This 12-step mutual support program provides groups for adults and teenagers who are the families and friends of alcoholics.

Al-Anon Family Group Headquarters, Inc. 1600 Corporate Landing Parkway Virginia Beach, VA 23454 757-563-1600

http://www.al-anon.alateen.org

Alcoholics Anonymous (AA)

This support group provides sponsorship and a 12-step program for life without alcohol.

P.O. Box 459 Grand Central Station New York, NY 10163 212-870-3400 http://www.aa.org

Alcoholics Victorious

For a full description, refer to Faith-Based

Organizations.

American Self-Help Sourcebook

This is a searchable database of more than 1,100 national, international, and online self-help support groups for addictions, bereavement, health, mental illness, disabilities, abuse, parenting, caregiver concerns, and other stressful life situations.

Saint Clare's Health Services 100 East Hanover Avenue, Suite 202 Cedarknolls, NJ 07927 973-401-2121 http://www.mentalhelp.net/selfhelp

Anesthetists in Recovery (AIR)

This is a network of recovering nurse anesthetists. Members support one another through phone support, information, and referrals to groups and treatment.

222 South Prospect Avenue Park Ridge, IL 60068 847-692-7050

http://www.aana.com/resources2/health-wellness/ Pages/Anesthetists-in-Recovery-(AIR)-.aspx

Asian Counseling and Referral Service, Inc.

This service provides a culturally competent, linguistically accessible community recovery center for Asian and Pacific Americans and other immigrants and refugees with a history of substance use disorders.

3639 Martin Luther King Jr. Way South Seattle, WA 98144 206-695-7600

http://www.acrs.org

Association of Persons Affected by Addiction (APAA)

This nonprofit recovery community organization is designed to engage the faces and voices of the recovery community in reducing stigma. It provides peer-to-peer recovery community support services.

3116 Martin Luther King Boulevard Dallas, TX 75215 214-634-APAA (2722)

http://www.apaarecovery.org

Benzodiazepine Anonymous (BA)

This is a mutual support group for people in recovery from addiction to benzodiazepines (Xanax®, Halcion®, Valium®, Ativan®, Dalmane®, Librium®, etc.) or any other addicting prescription drug. BA uses its own lists of 12 steps and 12 goals. 310-652-4100

Bucks County Council on Alcoholism

The council is an independent nonprofit organization whose mission is to provide resources and opportunities to reduce the impact of addiction and to improve related health issues for the entire community. It provides services such as consultation, assessment, intervention, and treatment. It serves the counties of Bucks, Chester, Delaware, Montgomery, and Philadelphia.

252 West Swamp Road, Suite 12 Doylestown, PA 18901 800-221-6333 215-345-6644 http://www.bccadd.org

Calix Society For a full description, refer to Faith-Based Organizations.

CAST Recovery Services

This organization provides individualized treatment planning in order to help their clients achieve healthy and productive lives. CAST's services include individual therapy, family therapy, case management, crisis management, interventions, sober companions, and workshops.

866-283-9885

http://www.castrecovery.com

Center for Community Alternatives: Recovery Network of New York

The center promotes reintegrative justice and a reduced reliance on incarceration through advocacy, services and public policy development in pursuit of civil and human rights.

115 East Jefferson Street, Suite 300 Syracuse, NY 13202 315-422-5638

http://www.communityalternatives.org

Center for the Application of Substance Abuse Technologies (CASAT) Frontier Recovery Network

The staff and peer volunteers of the Frontier Recovery Network assist recovering individuals in Reno, NV, with education about or referral for treatment, housing, transportation, child care, and life skills. Through university-based courses, continuing education workshops, and distance education, CASAT provides training for addiction treatment providers, criminal justice workers, and mental health professionals at the preservice and inservice levels.

Mail Stop 279 University of Nevada, Reno Reno, NV 89557 775-784-6265 http://casat.unr.edu

Central City Concern: Recovery Association Project (RAP)

This peer-led recovery community organization focuses on building leadership and power among people in recovery. Its strengths-based peer services are available to other groups, including trainings on organizing recovering people with a focus on leadership and active citizenship, and implementing a peer-led recovery mentor program.

500 Abernethy Road, Suite 4 Oregon City, OR 97045 503-908-1837 http://www.rap-nw.org

Chapter Nine Group of Hollywood, MD

This is a 12-step program of recovering couples in which partners work together. The group name comes from chapter nine of the Alcoholics Anonymous Big Book "The Family Afterwards," which is based on the belief that members of the family or couples should meet on the common ground of tolerance, understanding, and love.

1168 White Sands Drive Lusby, MD 20657 410-586-1425

Chemically Dependent Anonymous (CDA)

This group's purpose is to carry the message of recovery to the chemically dependent person for those with a desire to abstain from alcohol and drugs.

P.O. Box 423 Severna Park, MD 21146 888-CDA-HOPE (232-4673) http://www.cdaweb.org

Co-Anon Family Groups

This is a fellowship of men and women who are husbands, wives, parents, relatives, or close friends of someone who is chemically dependent. The program is primarily a 12-step program that combines self and mutual support systems.

P.O. Box 12722 Tucson, AZ 85732 800-898-9985 http://www.co-anon.org

Cocaine Anonymous World Services

This is a fellowship of men and women who share their experience, strength, and hope with each other so that they may solve their common problem and help others to recover from their addiction.

21720 South Wilmington Avenue, Suite 304 Long Beach, CA 90810 310-559-5833 http://www.ca.org

Collaborative Support Programs of New Jersey, Inc.

Institute for Wellness and Recovery Initiatives

This organization is a nonprofit, statewide agency managed and operated by and for consumers of mental illness services. The organization has four service areas that provide a full range of services throughout New York and New Jersey:

1) community outreach and self-help center services; 2) supportive housing services and housing development; 3) supported employment; and 4) technical assistance/training focused on the Eight Dimension Wellness Model.

8 Spring Street Freehold, NJ 07728 732-780-1175 http://www.cspnj.org http://www.welltacc.org

Connecticut Community for Addiction Recovery (CCAR)

A community of people in recovery, family members, friends, and allies, this group is organized to put a positive face and voice on recovery from substance use disorders.

198 Wethersfield Avenue Hartford, CT 06114 800-708-9145 http://www.ccar.us

Connecticut Department of Mental Health Addiction Services (DMHAS) For a full description, refer to Mental Illness.

Council of Southeast Pennsylvania, Inc.

This is a private nonprofit prevention, education, advocacy, assessment, intervention, and recovery support organization, serving the counties of Bucks, Chester, Delaware, Montgomery, and Philadelphia. The Council provides a wide range of services to reduce the impact of addiction and improve related health issues for the entire community, including families, schools, businesses, individuals, and the community, regardless of ability to pay, ethnicity, race, gender, age, or sexual orientation.

252 West Swamp Road Doylestown, PA 18901 215-345-6644 http://www.councilsepa.org

Council on Alcoholism and Drug Abuse

The council works cooperatively with a wide variety of groups and individuals to address concerns about alcoholism, other drug addictions and related problems. CADA is the administrative agency for Santa Barbara Fighting Back, a community collaborative to reduce the demand for alcohol and drugs in South Santa Barbara County.

232 East Canon Perdido Street, P.O. Box 28 Santa Barbara, CA 93102 805-963-1433 http://www.cadasb.org

Crystal Meth Anonymous

This program is a 12-step fellowship for those in recovery from addiction to crystal meth. The only requirement for membership is the desire to stop using crystal meth.

4470 West Sunset Boulevard, Suite 107 PMB 555 Los Angeles, CA 90027 855-638-4383 http://www.crystalmeth.org

Council on Substance Abuse (COSA-NCADD)

This is a nonprofit voluntary organization combating alcoholism, other drug addictions, and related problems. COSA-NCADD's major programs include prevention and education, information and referral, advocacy, public awareness, and technical assistance. COSA-NCADD is a member and the state association for the Community Anti-Drug Coalitions of America (CADCA).

828 Forest Avenue Montgomery, AL 36106 334-262-1629 http://www.cosancadd.org

CyberRecovery.Net

This website offers faith-based support forums for people in recovery.

http://www.cyberrecovery.net/forums

Detroit Recovery Project

This organization provides an array of support services, such as cognitive behavioral therapy; rapid HIV testing; hepatitis vaccinations; family re-integration; 12-step support groups; alcohol, tobacco, and other drug prevention; employment training; GED classes; and outpatient treatment to thousands of Detroiters every year. The ultimate goal is to encourage those seeking recovery to achieve and maintain long-term recovery and live productive, drug-free lifestyles.

1121 East McNichols Road Detroit, MI 48203 877-937-9377 http://recovery4detroit.com/

DC Bar – Lawyer's Assistance Program For a full description, refer to Justice/Legal System.

Double Trouble Recovery, Inc.

This is a fellowship of men and women who share their experience, strength, hope with each other so that they may solve their common problems, and help others to recover from their particular mental and substance use disorders.

800-328-9000 http://www.bhevolution.org/public doubletroubleinrecovery.page

Dual Recovery Anonymous (DRA)

This is a self-help program for individuals who experience a dual disorder of chemical dependency and a psychiatric or emotional illness. The group is based on the principles of the 12 steps and the personal experiences of individuals in dual recovery.

P.O. Box 8107 Prairie Village, KS 66208 877-883-2332 913-991-2703 http://www.draonline.org

Easy Does It, Inc.: Full Circle

This is a non-profit charitable organization dedicated to improving the quality of life of individuals and families recovering from the effects of addiction, thus contributing to the betterment of our community and society as a whole.

1300 Hilltop Road Leesport, PA 19533 610-373-2463 http://www.easydoesitinc.org

Emotions Anonymous (EA)

This is a 12-step organization, similar to Alcoholics Anonymous. The fellowship is composed of people who come together in weekly meetings to work toward recovery from emotional difficulties. EA members are from many walks of life and are of diverse ages, economic statuses, and social and educational backgrounds. The only requirement for membership is a desire to become well emotionally.

P.O. Box 4245 St. Paul, MN 55104 651-647-9712 http://emotionsanonymous.org

Exponents, Inc.

This minority-led organization is dedicated to improving the quality of life of individuals affected by drug addiction, incarceration, and HIV/AIDS. Programs assist individuals and their families through difficult transitions from addiction to recovery, from incarceration to civilian life, and from welfare to work.

151 West 26th Street, Third Floor New York, NY 10001 212-243-3434

http://www.exponents.org

Families Anonymous (FA)

This is a 12-step self-help recovery fellowship of support groups for relatives and friends of those who have alcohol, drug, or behavioral problems. The group is a nonprofit mutual help organization and is not affiliated with any religion or institution.

701 Lee Street, Suite 670 Des Plaines, IL 60016 800-736-9805

http://www.familiesanonymous.org

Family Empowerment Network (FEN)

This network offers support, education, and training for families of children with fetal alcohol syndrome or fetal alcohol effects, as well as interested professionals. The group creates a network of families that support one another and hosts annual family retreats.

1100 Delaplaine Court Madison, WI 53715 800-462-5254 608-261-1419

http://pregnancyandalcohol.org/fen

Fathers Against Drunk Driving (FADD)

This organization's mission is to reduce the alcohol-related deaths within the community. FADD has more than 7,000 members nationwide, in addition to members in Canada and Mexico.

76 West School Avenue Porterville, CA 93257 559-756-1748 http://www.faddintl.org

Fetal Alcohol Syndrome Family Resource Institute

This is a grassroots coalition of families and professionals concerned with fetal alcohol syndrome effects. The group offers educational programs, brochures, information packets, group meetings, phone support, conferences, and referrals.

P.O. Box 2525 Lynnwood, WA 98036 800-999-3429

http://www.fetalalcoholsyndrome.org

Foundation for Recovery

This organization promotes the positive impact recovery has in the community and in the lives of individuals and families affected by mental and/or substance use disorders. Its programs, services, and partnerships open pathways for recovery by removing social barriers and creating opportunities for those seeking recovery.

3321 North Buffalo Drive Las Vegas, NV 89129 702-257-8199 http://www.forrecovery.org

Free-N-One

This support group teaches people to be free mentally and spiritually, as well as free from drugs and alcohol. It offers information and referrals, phone support, literature, and conferences.

538 South Overhill Drive, Suite 2 Los Angeles, CA 90043 323-295-0009 http://www.free-n-one.org

GROUP Ministries, Inc.

This organization, through its Criminal Justice Initiative, provides HIV/AIDS support services in 10 state and county correctional facilities of Western New York.

799 Jefferson Avenue Buffalo, NY 14203 716-883-4367 http://gmibuffalo.org

Heartland Cares, Inc.

This project promotes effective long-term recovery among HIV-positive people in rural areas of Kentucky and Illinois.

619 North 30th Street, P. O. Box 2875 Paducah, KY 42001 877-444-8183 270-444-8183

http://www.hcares-org.doodlekit.com/home

Hypoics Not Anonymous (HNA)

HNA is for anyone with any type of addiction. The group uses the philosophy that addictions are caused by neurological mechanisms rather than personal weaknesses.

8779 Misty Creek Drive Sarasota, FL 34241 941-926-5209 http://www.nvo.com/hypoism/ hypoicsnotanonymous

International Doctors in Alcoholics Anonymous (IDAA)

This is a group of approximately 6,000 recovering health care professionals of doctorate level who help one another achieve and maintain sobriety from addictions.

2616 NW 25th Place Gainesville, FL 32605 352-375-0240 http://www.idaa.org

International Lawyers in Alcoholics Anonymous (ILAA)

This organization serves as a clearinghouse for support groups for lawyers who are recovering from alcohol or other chemical dependencies.

716-204-1055 http://www.ilaa.org

International Pharmacists Anonymous (IPA)

This is a 12-step fellowship of pharmacists and pharmacy students recovering from any addiction.

11 Dewey Lane Glen Gardner, NJ 08826 908-537-4295 http://home.comcast.net/~mitchfields/ipa/ ipapage.htm

Lesbian, Gay, Bisexual and Transgender Community Center SpeakOUT!: Voices for Recovery

This center works to create safe and welcoming spaces for lesbian, gay, bisexual, and transgender people in recovery.

208 West 13th Street New York, NY 10011 212-620-7310 http://www.gaycenter.org

LifeRing

This international nonprofit organization offers sober, secular self-help. Members rely on the strength of each individual and the influence of sober conversation to abstain from alcohol and drugs. LifeRing welcomes people from all faiths, or none, but those beliefs are private. LifeRing brings people together via face-to-face and online support groups, and provides sobriety tools through original books, publications, and interactive online resources.

1440 Broadway, Suite 312 Oakland, CA 94612 800-811-4142 http://www.lifering.org

MAP Accountability Services, LLC

This organization is the creator of the revolutionary 12-step based MAP Program. Through its Monitoring & Accountability Program, MAP is changing the field of recovery by successfully detecting early relapse behaviors and course correcting before a substance use event occurs. The result is multi-dimensional; alcoholics and addicts achieve a balanced life of long-term sobriety, and treatment centers are provided invaluable outcome data regarding the recovery rates of their alumni.

1114 Lost Creek Boulevard, Suite 500 Austin, TX 78746 855-627-1010 http://www.relapseprevention.org

Marijuana Anonymous World Services

This is a fellowship of men and women who share a desire to stop using marijuana. They accomplish their goals by using the basic 12 steps of recovery founded by Alcoholics Anonymous.

P.O. Box 7807 Torrence, CA 90504 800-766-6779 http://www.marijuana-anonymous.org

Massachusetts Organization for Addiction Recovery (MOAR)

This organization is a collective voice of people in recovery, families, and friends who are helping each other educate the public about the value of living in recovery and the resources to support recovery.

29 Winter Street, Second Floor Boston, MA 02108 617-423-6627 http://www.moar-recovery.org

Men Against Destruction Defending Against Drugs and Social Disorder (MAD DADS Inc.)

This organization provides family activities, community education, speaking engagements, and "surrogate fathers" who listen to and care about street teens.

P.O. Box 8980 Minneapolis, MN 55408 612-822-0802 http://www.maddads.com

Men for Sobriety

This organization's purpose is to help all men recover from problem drinking through the discovery of self, gained by sharing experiences, hopes, and encouragement with other men in similar circumstances.

P.O. Box 618 Quakertown, PA 18951 215-536-8026

Minnesota Recovery Connection (MRC)

This organization's mission is to strengthen the recovery community through peer-to-peer support, public education and advocacy. MRC envisions a world where recovery from addiction to alcohol and other drugs is understood, promoted, embraced, and enjoyed and where all who seek it have access to the support, care, and resources they need to achieve long-term recovery. This organization assists people seeking treatment, transportation, housing, job training, education, health, or other pathways to recovery.

253 State Street St. Paul, MN 55107 651-233-2080 http://www.minnesotarecovery.org

Mothers Against Drunk Driving (MADD)

This group's mission is to stop drunk driving, support victims, and prevent underage drinking.

511 East John Carpenter Freeway, Suite 700 Irving, TX 75062 800-ASK-MADD (275-6233) http://www.madd.org

MusiCares

This program provides a safety net of critical assistance for people in times of need. Its services and resources cover a wide range of financial, medical, and personal topics. It also focuses the resources and attention of the music industry on human service issues that directly impact the health and welfare of the music community.

11 West 42nd Street, 27th Floor New York, NY 10036-8002 310-392-3777 (West Region) 212-245-7840 (East Region) 615-327-0050 (South Region) http://www.musicares.com

Nar-Anon/Narateen

This organization provides support for families and friends of drug users.

22527 Crenshaw Boulevard, Suite 200 B Torrance, CA 90505 800-477-6291 310-534-8188 http://www.nar-anon.org

Narcotics Anonymous (NA)

This is a nonprofit fellowship society of men and women for whom drugs had become a major problem. Membership is open to all, regardless of the particular drug or combination of drugs used.

P.O. Box 9999 Van Nuys, CA 91409 818-773-9999 http://www.na.org

National Association for Children of Alcoholics (NACoA)

This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. NACoA provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.

10920 Connecticut Avenue, Suite 100 Kensington, MD 20895 888-55-4COAS (2627) 301-468-0985

http://www.nacoa.org

National Families in Action (NFIA)

This is a 501(c)(3) nonprofit organization that seeks to prevent the marketing of drugs and drug use to children and helped them form parent groups to protect children's health.

P.O. Box 133136 Atlanta, GA 30333 404-248-9676

http://www.nationalfamilies.org

National Family Partnership (NFP)

This partnership is a coalition of families working for substance use prevention. The group hosts a number of prevention activities, including the Red Ribbon Campaign and the Plant the Promise Campaign.

2490 Coral Way, Suite 501 Miami, FL 33145 800-705-8997 305-856-4886 http://www.nfp.org

National Home Infusion Association (NHIA)

This trade association represents and advances the interests of organizations that provide infusion and specialized pharmacy services and products to the entire spectrum of home-based patients.

100 Daingerfield Road Alexandria, VA 22314 703-549-3740 http://www.nhia.org

National Rural Alcohol and Drug Abuse Network, Inc. (NRADAN)

This private, nonprofit foundation promotes networking between rural programs and professionals, along with providing liaisons to key federal and state government agencies and private resources.

University of Wisconsin-Stout 712 South Broadway Street Menomonie, WI 54751 715-232-2793

http://www.uwstout.edu/outreach/nri

National Women's Health Resource Center (NWHRC)

This nonprofit organization, which is dedicated to helping women make informed decisions about their health, encourages women to embrace healthy lifestyles to promote well-being and prevent disease. The NWHRC website offers an extensive alphabetical listing of health topics – such as HIV/AIDS, substance abuse, smoking, and violence against women - that provide science-based information on their topics. Each section includes a link to the source reference documents used for developing the topic materials.

157 Broad Street, Suite 200 Red Bank, NJ 07701 877-986-9472 http://www.healthywomen.org

New England Institute of Addiction Studies (NEIAS)

This organization is dedicated to the education of professionals, volunteers, and the general public concerning alcohol and drug prevention and treatment issues. The Institute offers yearly intensive continuing education events supporting workforce development and skill building of the professionals and volunteers who provide services for substance abuse prevention, intervention, treatment and recovery organizations.

75 Stone Street Augusta, ME 04330 207-621-2549 http://www.neias.org

New York City Department of Health and Mental Hygiene Office of Consumer Affairs

This office responds directly to consumers' needs in three distinct disability areas: mental illness, mental retardation/developmental disabilities, and chemical dependency. The office has a dual mission – to ensure that consumer voice and perspectives are heard and integrated at all levels, and to empower consumers through education and exposure to resources. It works towards incorporating recovery principles and practices into the New York City's mental illness system, including the Division of Mental Hygiene.

42-09 28th Street, 19th Floor Queens, New York 11101 212-219-5393

http://www.nyc.gov/html/doh/html/home/home.shtml

North Carolina Voices for Recovery

This organization seeks to change public perceptions of recovery, demonstrate that recovery works for millions of Americans, and provide support to individuals in recovery, as well as their families.

http://www.ncv4recovery.org

Northern Ohio Recovery Association (NORA)

This organization is a community-based substance abuse prevention and peer recovery support organization whose purpose is to provide culturally relevant chemical dependency services presented with dignity and respect to youth, adults and families in Northern Ohio.

3746 Prospect Avenue Cleveland, OH 44115 216-391-6672 http://www.norainc.org

Oklahoma Citizen Advocates for Recovery and Treatment

This group's mission is to empower recovering people and their families through physical, emotional, and spiritual growth to make significant contributions to society.

2808 Northwest 31st Street Oklahoma City, OK 73112 866-848-7555 405-949-0929 http://www.ocarta.org

Overcomers In Christ (OIC)
For a full description, refer to Faith-Based
Organizations.

Overcomers Outreach, Inc.
For a full description, refer to Faith-Based
Organizations.

Partnership for a Drug-Free Detroit

This organization offers useful information, training, and city-wide support and resources for making communities safe and drug-free.

800-467-2452 888-736-0253

http://www.drugfreedetroit.org

Pascua Yaqui Tribe of Arizona: Guadalupe Community Change Oriented Recovery Effort (CCORE)

This program provides quality, competent, and culturally compatible peer services to tribal and community members.

9446 Calle Azteca Guadalupe, AZ 85283 480-768-2025

http://www.pascuayaqui-nsn.gov/index php?option =com_content&view=article&id=59<emid=52

Pennsylvania Recovery Organizations Alliance, Inc. (PRO-A) Statewide/Regional Community Mobilization Project

This project supports recovery through peerdriven support services and education.

900 South Arlington Avenue, Suite 254-A Harrisburg, PA 17109 717-545-8929

http://www.pro-a.org

Pills Anonymous (PA)

This self-help, self-supporting, anonymous 12-step program is based on Alcoholics Anonymous. It is designed for those who want to help themselves and others recover from chemical addiction.

http://www.pillsanonymous.org/

Pima Prevention Partnership

This partnership aims to reduce relapse and supports wellness using a strength-based approach to recovery.

924 North Alvernon Way Tucson, AZ 85716 520-791-2711

http://www.thepartnership.us

Pinal Hispanic Council: Proyecto Bienestar (Project WellBeing)

This project seeks to empower members to assist others, motivating them to sustain recovery through education and training within the Hispanic recovery community.

712 North Main Street
Eloy, AZ 85231
520-466-7765
http://www.pinalhispaniccouncil.org/grants/
RCSPGrant htm

The RASE Project

This project in south central Pennsylvania provides recovery support services, events, training and education, supportive housing, and intervention services. The RASE Project also offers the Buprenorphine Coordinator Program, providing recovery support for those in medication-assisted treatment for opioid addiction.

100 North Cameron Street, Suite 401-E Harrisburg, PA 17101 717-232-8535 http://www.raseproject.org

Rational Recovery Systems (RRS)

This is a program of self-recovery from addiction to alcohol and other drugs through planned, permanent abstinence using Addictive Voice Recognition Technique (AVRT).

P.O. Box 800 Lotus, CA 95651 530-621-2667 http://www.rational.org

Recovering Your Body

This organization promotes the awareness of the benefits of fitness, nutrition, athletics, and energy healing in the recovery process through a website, articles, videos and, with the help of others, concrete programs.

4 Ridgedell Avenue Hastings-on-Hudson, NY 10706 914-478-5048 http://www.recoveringyourbody.com

Recovery Alliance of El Paso

The alliance was organized in 1998 to fight stigma for people in recovery from substance use disorders and is now dedicated to providing peer-to-peer recovery support services.

P.O. Box 9669 El Paso, TX 79995 866-535-7276 915-594-7000

http://www.recoveryalliance.net

Recovery Consultants of Atlanta, Inc. For a full description, refer to Faith-Based Organizations.

RecoveryNC

For a full description, refer to Education.

Recovery Network, Inc.

This organization provides peer-based support and recovery services that use evidence-based methods to empower consumers with their recovery efforts and assist them through partnership with community organizations to become self-sufficient members of society.

114 East Lawrence Avenue, Suite 110 Charlotte, MI 48813 517-543-2312 http://www.recoverynetworkmi.org

Relief Nurseries, Inc.: Accessing Success

This project provides a unique array of comprehensive family support services that are easily accessible to low-income parents with children up to six years of age who are at high risk for abuse or neglect.

1720 West 25th Avenue Eugene, OR 97405 541-343-9706 http://www.reliefnursery.org

Rehab Programs Inc.

This community service provider helps find the right rehab program for those suffering from drug and alcohol addictions. With over 20 years in the substance abuse field, Rehab Programs Inc. understands the needs of people and their families.

866-501-3366 http://www.rehab-programs.org

Remove Intoxicated Drivers (RID)

This group's mission is to deter impaired driving and teen binge drinking that often leads to intense trauma for all concerned. Its members advocate for victims, enablers of tough laws, and watchdogs for law enforcement and adjudication in the courts.

P.O. Box 520 Schenectady, NY 12301 888-283-5144 518-372-0034 http://www.rid-usa.org

Rhode Island Department of Behavioral Healthcare, Developmental Disabilities and Hospitals

This organization is committed to assuring access to quality services and supports for Rhode Islanders with developmental disabilities, mental and/or substance use issues, and chronic long-term medical and psychiatric conditions.

14 Harrington Road, Barry Hall Cranston, RI 02920 401-462-2339 http://www.bhddh.ri.gov

Rockland Council on Alcoholism & Other Drug Dependence, Inc.: Friends of RecoveryRockland (FOR-Rockland)

The council challenges stereotypes about addiction recovery. They provide support services and prevention education and training.

25 Smith Street, Suite 101 Nanuet, NY 10954 845-215-9788 http://www.rcadd.org

Rockstar Superstar Project (RSSS)

In a culture pervasive with messaging and branding that encourages risky behavior, RSS is on a mission to Rebrand Sobriety, promote Personal Responsibility and inspire Dream Catching. RSSS programs encourage others to overcome obstacles with a creative boldness and to live with purpose. Programs include presentations available for middle/high schools, colleges and communities, a Rockin' Recovery Concert Tour, and more.

555 Eighth Avenue, Suite 909 New York, NY 10018 http://www.rockstarsuperstarproject.com

Rosehedge/Multifaith Works

This group serves vulnerable men and women living with HIV/AIDS by providing housing, compassionate health care, and supportive services that enhance the quality of their lives. Rosehedge/Multifaith Works unites communities of compassionate care and inclusive spirituality with people living in isolation and loneliness.

115 16th Avenue Seattle, WA 98112 206-324-1520

http://www.rosehedge.org/rosehedge-multifaith-works-home

Schizophrenia Anonymous (SA)

This is a self-help support group for people diagnosed with schizophrenia or a schizophrenia-related illness. SA was founded in the Detroit area in July 1985, and since that time, thousands of people have participated in meetings. There are currently more than 150 groups meeting throughout 31 states as well as Australia, Brazil, Canada, Mexico, France, India, and Venezuela.

P.O. Box 941222 Houston, TX 77094 866-800-5199 240-423-9432

http://www.sardaa.org/sa_main.html

Serving Children and Adolescents in Need

This youth outreach group encourages substance use prevention and treatment by promoting recovery, reducing relapse, and intervening when relapse does occur. The programs provide peer-designed and peer-led services with an emphasis on leadership development, principles of self-care, and cultural diversity among participants.

2347 East Saunders Street Laredo, TX 78401 800-355-7226 http://www.scan-inc.org

Shouting Inside

This website helps young people who misuse substances share their stories and their struggles with like-minded young people.

http://www.shoutinginside.com

SMART Recovery®

This international nonprofit organization offers free, self-empowering, science-based mutual help groups for abstaining from any substance or activity addiction. SMART stands for Self Management and Recovery Training. The SMART Recovery 4-Point Program® helps people recover from all types of addictive behaviors, including alcohol, drugs, substance abuse, gambling addiction, and addiction to other substances and activities. It currently sponsors more than 825 face-to-face meetings around the world and more than 26 online meetings per week, including a weekly online meeting for family and friends.

7304 Mentor Avenue, Suite F Mentor, OH 44060 866-951-5357 440-951-5357

http://www.smartrecovery.org

Sober.com

This website is committed to providing those in need of drug rehab programs, alcoholism treatment, and substance abuse services with the most accurate information available.

855-585-8166 http://www.sober.com

The Sober Recovery Community

This website offers support forums for people in recovery, as well as friends and family members affected by someone's substance use.

http://www.soberrecovery.com/forums

Sobriety Television

This is a YouTube channel with videos about addiction and recovery, as well as stories of recovery, the 12 steps, addiction topics, independent films, and more.

http://youtube.com/sobrietytelevision

Social Workers Helping Social Workers (SWHSW)

This group supports people's recovery from alcohol or other chemical dependence, either their own or that of a significant other, among social workers, Bachelor's of Social Work/Master's of Social Work, or Master's of Social Work (MSW), or MSW matriculating students. Social workers with other addictions are welcome to attend meetings.

http://www.socialworkershelping.org

Southcentral Foundation: Alaska Women's Recovery Project (AWRP)

This project provides community-based, peerdriven and peer-led recovery support for women whose lives have been disrupted by alcoholism, drug addiction and co-occurring mental disorders.

Gathering Place for Women Recovery Community Center 505 West Northern Lights Boulevard, Suite 102 Anchorage, AK 99503 907-729-5190

http://www.southcentralfoundation.com/services/AWRP.ak

Steppin' Out Radio

The goal of this one-of-a-kind radio show is to produce powerful radio broadcasts and provide an outlet for participants in 12-step meetings to share their stories.

Powerful Radio Productions, Inc. P.O. Box 328 Sparkill, NY 10976 845-359-3299 http://www.steppinoutradio.com

The Substance Abuse and Addiction Recovery Alliance (SAARA)

This is a community-based grassroots membership organization of individuals in recovery from substance use disorders, their families, friends, and committed community supporters throughout Virginia.

306 Turner Road, Suite P Richmond, VA 23225 804-762-4445 http://www.saara.org

TASC, Inc. of Illinois

This nonprofit organization conducts research, advances public policy, and provides services to ensure that individuals with mental and/or substance use disorders receive treatment and access to recovery.

1500 North Halsted Street Chicago, IL 60642 312-787-0208 http://www.tasc.org

Tohono O'Odham Nation

This tribal government is establishing a recovery community service project and peer-to-peer system.

P.O. Box 837 Sells, AZ 85634 520-603-2477 http://www.tonation-nsn.gov

Voices of Recovery, San Mateo Valley

This organization is for people seeking and maintaining long-term recovery from their own addictions, and long-term recovery from being affected by other people's addictions. It provides community educational and recovery support services.

310 Harbor Boulevard Belmont, CA 94002 650-630-4211 http://www.voicesofrecovery-sm.org

Welcome Home Ministries

This faith-based program is for women who face the dual challenges of recovery and re-entry to society from incarceration.

P.O. Box 184
Richmond, OH 43944
740-765-4959
http://www.welcomehomeministries.org

White Bison, Inc.

For a full description, refer to Native Americans under Culture Specific.

Women for Sobriety, Inc.

This nonprofit organization is dedicated to helping women overcome alcoholism and other addictions.

P.O. Box 618

Quakertown, PA 18951

215-536-8026

http://www.womenforsobriety.org

Women in New Recovery: Our Common Welfare

This recovery community organization is a residential treatment facility for women in Arizona and New Mexico.

860 North Center Street Mesa, AZ 85201 480-464-5764 http://www.winr.org

TREATMENT/RECOVERY: TREATMENT ORGANIZATIONS

These organizations are traditional mental and/ or substance use disorder treatment facilities that offer inpatient and outpatient treatment and continuing care.

Alcohol and Drug Rehab Treatment Resource Center

This online center provides information on key issues about alcohol and drug abuse, including intentions, rehab, and treatment. Visitors must enter identifying information to participate in this website.

http://www.addict-help.com

Behavioral Health Services (BHS)

This nonprofit organization has provided a continuum of substance use, mental illness, and senior services since 1973. Each of its 11 facilities (located throughout Los Angeles County) is based on its mission of transforming lives by offering hope and opportunities for recovery, wellness, and independence.

15519 Crenshaw Boulevard Gardena, CA 90249 562-599-8444, ext. 4207 http://www.bhs-inc.org

Betty Ford Center

This center provides treatment for chemical dependency, as well as support and educational resources for family members and children of clients.

39000 Bob Hope Drive Rancho Mirage, CA 92270 800-434-7365 760-773-4100 http://www.bettyfordcenter.org

Beit T'Shuvah

This is a facility where approximately 120 residents interact with clinical staff in a healing atmosphere that emphasizes faith-based recovery and the values of the Jewish community. The organization's goal is to reduce the incidence of addiction and other harmful behaviors through individual and family education.

8831 Venice Boulevard Los Angeles, CA 90034 310-204-5200 http://www.beittshuvah.org

Caron Treatment Center

This center offers detoxification, gender-separate rehabilitation, relapse treatment, and extended care for adults and adolescents; educational programs for family members; and student assistance services.

243 North Galen Hall Road Wernersville, PA 19565 800-854-6023 http://www.caron.org

Community Bridges

This is a private nonprofit organization that provides services throughout Arizona, including a full continuum of the highest quality substance abuse and mental illness treatment, lifesaving interventions, support for women and children, outreach to help the homeless, and community-based prevention and education services for youth and families.

1811 South Alma School Road, Suite 160 Mesa, AZ 85210 877-931-9142

http://communitybridgesaz.org

CRC Health Group

This group offers the most comprehensive network of specialized behavioral care services in the nation, serving more than 30,000 people each day in 140 facilities, as well as providing healing and hope in the lives of patients, students, and families. For more than two decades, CRC programs have helped individuals and families reclaim and enrich their lives.

20400 Stevens Creek Boulevard, Sixth Floor Cupertino, CA 95014 877-272-8668 408-998-7260 http://www.crchealth.com

Fairview Recovery Services

Fairview offers individually tailored services for people suffering from chemical dependency.

5 Merrick Street Binghamton, NY 13904 607-722-8987 http://www.frsinc.org

Father Martin's Ashley

This is a private, nonprofit facility for the treatment of substance use disorders serving people aged 18 and over since 1987. It offers a comprehensive program of services for individuals and families afflicted by the disease of addiction.

800 Tydings Lane Havre de Grace, MD 21078 800-799-4673 410-273-6600 http://www.fathermartinsashley.com

Foundations Recovery Network

This is a treatment and advocacy organization dedicated solely to the treatment and recovery of people with co-occurring substance use and mental disorders. The agency has a full continuum of care, with locations in Memphis and Nashville, TN.

210 Westwood Place Brentwood, TN 37027 877-345-3357 615-345-3200 http://www.dualdiagnosis.org

Gateway Foundation

This foundation is a private, nonprofit organization providing substance use treatment; each year, 29,000 clients are provided care in community-based and correctional settings.

55 East Jackson Boulevard, Suite 1500 Chicago, IL 60604 877-505-HOPE (4673) 312-663-1130 http://www.gatewayfoundation.org

Gaudenzia, Inc.

This group helps people affected by chemical dependency, mental illness, and related conditions to achieve a better quality of life – allowing them to live as productive and accountable individuals.

106 West Main Street Norristown, PA 19401 610-239-9600 http://www.gaudenzia.org

Grace Street Recovery Services

This organization provides addiction and mental illness treatment and recovery services for individuals and families struggling with addiction.

105 Middle Street Lewiston, ME 04240 207-312-4408

Hazelden Foundation

This national nonprofit organization founded in 1949 helps people reclaim their lives from the disease of addiction. Hazelden's comprehensive approach to addiction addresses the full range of patient, family, and professional needs, including treatment and continuing care, research, higher learning, public education and advocacy, and publishing.

P.O. Box 11 Center City, MN 55012 800-257-7810 651-213-4200 http://www.hazelden.org

HealthRight360

This organization gives hope, builds health, and changes lives for people in need by providing compassionate, integrated care that includes primary medical, mental health, and substance use disorder treatment.

1735 Mission Street San Francisco, CA 94103 415-762-3700 http://www.healthright360.org

Lakeview Health Alcohol Rehab Center

This organization is a Florida rehab center licensed by the Florida Department of Children and Families and nationally accredited by The Joint Commission.

1900 Corporate Square Boulevard Jacksonville, FL 32216 1-800-884-1727 http://www.lakeviewhealth.com/ alcohol-rehab-center.php

Mayo Clinic, Addiction Psychiatry

This addiction psychiatry unit offers chemical dependency programs for people with substance use disorders.

http://www.mayoclinic.org/addiction-treatment

200 First Street SW Rochester, MN 55905 507-284-2220 **Mount Saint John Home & School for Boys**This residential treatment center is for boys

This residential treatment center is for boys with behavioral and learning problems.

135 Kirtland Street
Deep River, CT 06417
860-343-1300
http://www.mtstjohn.org

Narconon

This is a nonprofit drug rehab program dedicated to eliminating drug abuse and drug addiction through drug prevention, education, and rehabilitation.

4652 Hollywood Boulevard Hollywood, CA 90027 800-775-8750 323-962-2404

http://www.narconon.org

Narconon Arrowhead

This group is located in Oklahoma and is part of the larger Narconon International group. It uses a full approach to treatment and recovery by teaching participants how to live a drug-free life.

800-468-6933 918-339-5800

http://www.narcononarrowhead.org

Newport Academy

This treatment center is dedicated to providing comprehensive, gender-specific, integrated treatment programs for adolescent males and females in an environment of caring and compassion by which teens and their families may recover from the destructive effects of substance use disorders and related behavioral health issues. It offers separate residential facilities and has an active after-school program in Orange County, CA.

866-382-6651

http://www.newport-academy.com

Phoenix House

This nonprofit organization serves individuals throughout the country who are struggling with mental and/or substance use disorders. Phoenix House provides residential and outpatient treatment along with prevention and recovery support services.

2191 Third Avenue New York, NY 10035 800-DRUG-HELP (3784-4357) http://www.phoenixhouse.org

Reality House, Inc.

This organization provides culturally appropriate substance abuse and HIV treatment and prevention services to New Yorkers living mainly in Harlem, Washington Heights, and the South Bronx.

34-51 Vernon Boulevard Long Island City, NY 11106 212-281-6004 http://www.realityhouseny.org

Recovery Connection

This is a comprehensive addiction and mental illness treatment resource and rehabilitation referral service. The organization has staff across the country available 24 hours a day to answer all concerns about substance use, addiction and mental illness treatment, and rehabilitation.

http://www.recoveryconnection.org

Recovery Resource Center

This organization operates inpatient and outpatient services in Quincy, IL. Formerly known only for substance abuse services, the organization expanded its offerings to include general behavioral health. Now, we serve adolescents and adults who suffer from a variety of problems that are substance abuse, anger, violence, emotional and family based.

428 South 36th Street
Quincy, IL 62301
217-224-6300
http://www.recoveryres.org

Resolution Ranch

This is a therapeutic camp in Texas for troubled teen boys ages 13 to 17.

254-718-3364

http://www.resolutionranch.com

Ridgeview Institute

This institute provides substance use and mental illness treatment services in Georgia.

3995 South Cobb Drive Symrna, GA 30080 800-329-9775 770-434-4567

http://www.ridgeviewinstitute.com

Rimrock Foundation

This foundation offers community-developed treatment services for substance use disorders and compulsive behaviors.

1231 North 29th Street Billings, MT 59101 800-227-3953 406-248-3175 http://www.rimrock.org

Sagebrush

This holistic residential treatment center for adults provides a small, individualized clinical program to give an ideal recovery environment where one can focus on mental, physical, and spiritual well-being.

P.O. Box 554 Great Falls, VA 22066 888-406-7444 http://www.sagebrushva.com

Stepping Stone of San Diego

This group provides treatment and recovery services focusing on the lesbian, gay, bisexual, and transgender communities of San Diego.

3767 Central Ave San Diego CA92105 619-278-0777 http://www.steppingstonesd.org

Two Dreams Outer Banks

This is a comprehensive wellness program that provides individualized care for those who dream of recovering a healthy lifestyle. Two Dreams is located on the Outer Banks of North Carolina and customizes an array of treatment components, therapeutic services, and recreational activities to help its guests achieve emotional peace, physical health, and personal productivity.

P.O. Box 635 Corolla, NC 27927 1-877-355-DREAM (3732) http://www.twodreamsouterbanks.com

Valley Hope Association

This nonprofit organization has provided quality substance use disorder treatment services since 1967. It operates treatment facilities in Arizona, Colorado, Kansas, Missouri, Nebraska, Oklahoma, and Texas.

P.O. Box 510 Norton, KS 67654 800-654-0486 (General Information) 800-544-5101 (Admissions) http://www.valleyhope.com

The Village South

This group offers substance use disorder treatment programs and referrals for job training, shelter, and HIV testing for the diverse communities of Miami-Dade County, FL.

3050 Biscayne Boulevard, Ninth Floor Miami, FL 33137 800-443-3784 305-573-3784

http://www.villagesouth.com

The Watershed

This is a group of recovery facilities that provide services including detoxification, residential rehabilitation, intensive outpatient treatment, prevention, and education.

800-861-1768 http://www.thewatershed.com

WORKPLACE

These organizations provide support to help address mental and/or substance use disorders that arise in the workplace.

A Safe Haven Foundation

This foundation supports an individual as he or she enters into and sustains long-term recovery from substance use. It works with each person to develop a personal "Continuum of Housing and Care."

2750 West Roosevelt Road Chicago, IL 60608 773-435-8300

http://www.asafehaven.com

America in Recovery

This program offers a no-charge hiring website that helps employers and potential employees who are in recovery find each other.

6901 Alabonson Houston, TX 77088 http://www.americainrecovery.org

American Federation of Government Employees (AFGE)

This group is the largest federal employee union representing 600,000 federal and Washington, D.C., government workers nationwide and overseas. Workers in virtually all functions of government at every federal agency depend on AFGE for legal representation, legislative advocacy, technical expertise, and informational services.

80 F Street NW Washington, DC 20001 202-737-8700 http://www.afge.org

American Federation of State, County and Municipal Employees (AFSCME)

This group is the nation's largest and fastest-growing public service employees' union. It has 1.4 million members and is made up of people who serve the public every day in all areas of government, health, education, and other services, both public and private.

1625 L Street NW Washington, DC 20036 202-429-1000 202-659-0446 (TTY) http://www.afscme.org

American Psychological Association For a full description, refer to Provider and Professional Organizations.

America's Health Insurance Plans

This is a health plan association representing more than 1,000 health plans throughout the country. It provides information on managed care organization educational programs, health care delivery, research, services, and products.

601 Pennsylvania Avenue NW South Building, Suite 500 Washington, DC 20004 202-778-3200 http://www.ahip.org

Communities of Tomorrow's Economic Development (CT)

This organization cooperates with industry players, associations, regional economic development authorities, and other stakeholders to create economic development in the private sector. It focuses on the expansion of existing enterprises and the creation of new enterprises to drive economic growth and maximize return on investment in innovation.

250-10 Research Drive, Innovation Place Regina, Saskatchewan S4S 7J7, Canada 306-522-6699

http://www.communitiesoftomorrow.ca

Corporation for Supportive Housing

Since 1991, CHS advances its mission to help communities create permanent housing to prevent and end homelessness by providing advocacy, expertise, leadership, and financial resources to make it easier to create and operate supportive housing.

50 Broadway, 17th Floor New York, NY 10004 212- 986-2966 http://www.csh.org

DC Bar – Lawyers Assistance Program For a full description, refer to Justice/Legal System.

The Council on Alcohol and Drugs Houston

This organization helps companies increase safety and productivity through the establishment of comprehensive drug-free workplace programs.

303 Jackson Hill Street Houston, TX 77007 713-942-4100

http://www.council-houston.org/Workplace_ Services/Workplace_Services.aqf

Employee Assistance Professionals Association, Inc. (EAPA)

This membership organization offers resources to employee assistance professionals.

4350 North Fairfax Drive, Suite 410 Arlington, VA 22203 703-387-1000 http://www.eap-association.com

Employee Assistance Society of North America

This society provides information for EAP professionals and organizations.

2001 Jefferson Davis Highway, Suite 1004 Arlington, VA 22202 703-416-0060 http://www.easna.org

Employee Health Programs

This group, a subsidiary of First Advantage Corporation, designs and manages drug-free workplace programs, employee assistance programs, and other services that benefit employers and employees.

P.O. Box 2430 Rockville, MD 20827 800-821-4473 http://www.ehp.com

Federation of State Physician Health Programs (FSPHP)

This organization evolved from initiatives taken by the American Medical Association (AMA) and individual state physician health programs, focusing upon rehabilitation and monitoring of physicians with psychoactive substance use disorders as well as mental and physical illnesses.

c/o American Medical Association 515 North State Street, Room 8584 Chicago, IL 60654 312-464-4574

http://www.fsphp.org

Institute for a Drug-Free Workplace

This institute emphasizes the need for drug-free workplace programs and educates employers and the public at large about the rights and responsibilities of employers and employees with regard to substance use disorders and the workplace.

10701 Parkridge Boulevard, Suite 300 Reston, VA 20191 703-391-7222

http://www.drugfreeworkplace.org

International Brotherhood of Electrical Workers (IBEW)

This group represents approximately 750,000 members who work in a wide variety of fields, including utilities, construction, telecommunications, broadcasting, manufacturing, railroads, and government.

900 Seventh Street NW Washington, DC 20001 202-833-7000 http://www.ibew.org

Labor Assistance Professionals (LAP)

This organization is composed of members of trade and industrial unions involved in the provision or administration of member assistance programs, with special emphasis on issues of chemical abuse or dependency. It is dedicated to obtaining comprehensive alcohol and drug treatment and all other mental illness services for its members at a reasonable and fair price.

13 Bolton Gardens Bronxville, NY 10708 914-961-5867

http://www.laborassistanceprofessionals.com

Laborers' Health and Safety Fund of North America (LHSFNA)

This group exists to enhance jobsite safety and health, improve the competitiveness of signatory employers of the Laborer's International Union of North America (LIUNA), and strengthen LIUNA.

905 16th Street NW Washington, DC 20006 202-628-5465 http://www.lhsfna.org

Lawyers Helping Lawyers

This organization provides confidential, nondisciplinary help for lawyers, judges, law students, and their family members with substance use or mental disorders. Assistance may take many forms, such as assessment, professional consultation, information about and referral to treatment resources, informal and formal interventions, and monitoring.

600 East Main Street, Suite 2035 Richmond, VA 23219 804-644-3212 http://www.valhl.org

National Drug-Free Workplace Alliance

The alliance offers drug-free workplace program assistance and education.

2600 Ninth Street North, Suite 200 St. Petersburg, FL 33704 727-471-0009 http://www.ndwa.org

National Safety Council (NSC)

This council is a nonprofit public service organization dedicated to educating and influencing people to prevent accidental injuries and deaths.

1121 Spring Lake Drive Itasca, IL 60143 800-621-7615 630-285-1121 http://www.nsc.org

Technical Assistance and Professional Training National Association on Drug Abuse Problems, Inc.

This program provides workforce development professionals working in chemical dependency treatment programs with valuable tools for preparing clients for work. The program provides one-on-one technical assistance to treatment program staff by offering customized in-services, consultation, assessment of services, and resources for optimizing employment outcomes.

355 Lexington Avenue New York, NY 10017 212-986-1170 http://www.nadap.org

Society for Human Resource Management (SHRM)

This is the world's largest association devoted to human resource management.

1800 Duke Street Alexandria, VA 22314 800-283-7476 http://www.shrm.org

U.S. Chamber of Commerce

The U.S. Chamber of Commerce provides resources for U.S. businesses, including information on EAPs and drug testing.

1615 H Street NW Washington, DC 20062 202-659-6000 http://www.uschamber.com

Washington State Labor Council (WSLC)

This council represents and provides services for hundreds of local unions and trade councils throughout Washington State. Its core programs are legislative advocacy, political action, communications and media relations, and assistance with organizing campaigns.

314 First Avenue West Seattle, WA 98119 800-542-0904 206-281-8901 http://www.wslc.org





SINGLE-STATE AGENCY DIRECTORY: PREVENTION AND TREATMENT OF MENTAL AND SUBSTANCE USE DISORDERS

Each U.S. state and territory offers information and support regarding mental and substance use disorders through the local government offices listed below. The following facilities are licensed, certified, or otherwise approved for inclusion by their state's mental and/or substance use disorder treatment authority. Their role is to plan, carry out, and evaluate mental and substance use disorder prevention and treatment services provided to individuals and families. Specifically, they oversee treatment centers and counselors in their respective states and, in many cases, supply funding to providers, track state trends, and ensure that residents receive the services to which they are entitled. Unless the mental illness and substance use offices are combined – as they are in many states – the prevention office is listed first, followed by mental illness and substance use services offices.

Alabama

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Montgomery, AL 36130 Phone: 334-353-8969 Fax: 334-242-0796

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CentralOfficeOrganization.aspx#PreventionServices

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Montgomery, AL 36130 Phone: 334-242-3961 Fax: 334-242-0759

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P.O. Box 110620 Juneau, AK 99811 Phone: 907-465-1188 Fax: 907-465-1189 L.casto@alaska.gov

http://dhss.alaska.gov/dbh/Pages/Prevention/

default.aspx



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melissa.stone@alaska.gov

http://www.hss.state.ak.us/dbh

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Acting Assistant Director

Division of Systems Development and

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Department of Human and Social Services

American Samoa Government

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Pago Pago, AS 96799 Phone: 684-633-1571

Fax: 684-633-1504 louisat@dhss.as

http://www.dhss.as

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Centennial Building, Suite 301

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Fax: 684-633-7449

http://www.dhss.as

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Office of Prevention

Division of Behavioral Health Services

Arizona Department of Health Services

150 North 18th Avenue, Suite 280

Phoenix, AZ 85007 Phone: 602-364-4594

Fax: 602-364-4767 lisa.shumaker@azdhs.gov

http://www.azdhs.gov/bhs/index.htm

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150 North 18th Avenue, Suite 500

Phoenix, AZ 85007 Phone: 602-364-4566 Fax: 602-502-1062

laura.nelson@azdhs.gov http://www.azdhs.gov/bhs

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Little Rock, AR 72205

Phone: 501-686-9873 Fax: 501-686-9396

sharron.mims@arkansas.gov

http://humanservices.arkansas.gov/dbhs/Pages/

Overview-of-Prevention-Services.aspx



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Little Rock, AR 72205 Phone: 501-686-9871 Fax: 501-686-9105

ann.brown@arkansas.gov

http://humanservices.arkansas.gov/dbhs/Pages/

default.aspx

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http://www.adp.ca.gov/Prevention/programs.shtml

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http://www.adp.ca.gov/Prevention/programs.shtml

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http://www.colorado.gov/cs/Satellite/CDHS-BehavioralHealth/CBON/1251578892077



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Satellite?c=Page&childpagename =CDHS-

BehavioralHealth%2FCBONLayout&cid=12515814493

73&pagename=CBONWrapper

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http://www.ct.gov/dmhas/site/default.asp

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http://www.ct.gov/dmhas/site/default.asp

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http://www.dhss.delaware.gov/dhss/dsamh/

prevention.html

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Palikir Pohnpei, FM 96941 Phone: 011-691-320-5520 Fax: 011-691-320-5521 kwalliby@fsmhealth.fm

http://www.fsmgov.org/info/health.html

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http://www.dcf.state.fl.us/programs/samh/ SubstanceAbuse/prevention.shtml

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prevention-treatment/index.html



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Intervention/tabid/380/Default.aspx

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lowa

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http://www.kdads.ks.gov/CSP/Addict_Prevent_Index.html

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Personal Recovery Stories

JOIN THE VOICES FOR RECOVERY

This September marks the 24th annual **National Recovery Month (Recovery Month)** observance, sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA) (http://www.samhsa.gov), within the U.S. Department of Health and Human Services (HHS) (http://www.hhs.gov). This initiative raises awareness about the mental and substance use disorders that affect millions of individuals, as well as their families, and celebrates those in recovery. It also recognizes the contribution made by those who work in the behavioral health field.

This year's theme, "Join the Voices for Recovery: Together on Pathways to Wellness," represents the many ways that people can prevent mental and substance use disorders, seek treatment, and sustain recovery as part of a commitment to living a mentally, physically, emotionally, and spiritually healthy life. The theme also highlights that people are not alone on this journey to seek total health every day. Family, friends, and community members can support individuals throughout the entire recovery process.

The following narratives provide personal perspectives on the benefits of prevention, treatment, and recovery. While every story is unique, they all illustrate this year's **Recovery Month** theme by showing that there are many pathways to wellness, each with positive outcomes for individuals, families, and communities. These stories are an inspiration to take action and seek treatment for a mental and/or substance use disorder, or help a loved one in need.

"Speaking together, we can change the conversation on addiction and recovery and, in so doing, pave the way for healthier and safer individuals, families, and communities."

- Peter Gaumond

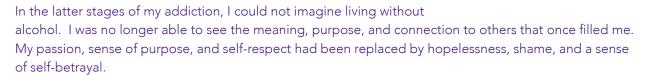


PETER GAUMOND

Chief, Recovery Branch, Office of National Drug Control Policy Washington, DC

My name is Peter, and I'm a person in long-term recovery. For me, that means it has been more than 26 years since I have had to drink or use any other substance.

When I was struggling to overcome my addiction to alcohol, I could not have imagined saying those words – to the world or even to myself.



However, as I began to walk the path to recovery, I started to catch glimpses of a world beyond the bleak landscape of addiction – a world of renewed meaning and purpose in which I could once again find ways to contribute.

For almost 20 years, I chose not to talk publicly about my addiction and my recovery. While my family and friends knew I was in recovery, others did not. Ironically, during those two decades, I worked in the addictions field as a counselor, educator, program director, and state government official. When I finally made the decision to openly acknowledge my recovery and to share about it in public forums, a weight was lifted from my shoulders. I realized that I had been struggling internally with the same stigma and shame that I hoped to combat in the community. "Going public" as a person in recovery has allowed me to more authentically embody my passion, has given me a new tool for helping heal the individual, family, and social wounds caused by addiction, and has deepened and broadened my sense of connection to others in recovery and to the broader community.

When I share, my focus is not on "war stories" or on a specific recovery pathway, but rather on what I like to think of as universal truths about addiction and recovery, such as: addiction is a disease of isolation; it does not discriminate, it affects people of all genders, social, economic, cultural, and ethnic backgrounds; recovery is a transformative process that has individual, family, and community dimensions; and, there are many pathways to recovery. As more and more of us share our stories, I believe the broader community will begin to recognize that addiction is a "we" problem that must be addressed by the whole community and not a "them" problem that can simply be relegated to law enforcement or fixed by treatment and forgotten. When we speak our truth, we are heard. Speaking together, we can change the conversation on addiction and recovery and, in so doing, pave the way for healthier and safer individuals, families, and communities.





ALLEN MCQUARRIE

Chapter and Committee Chair, PRO-ACT Doylestown, PA

During my 26 years in long-term recovery, I've learned that no one in recovery got here without being coached, mentored, and assisted by peers – before, during, after, or even in the absence of formal treatment. We all have one thing in common: we were led into recovery by caring, compassionate, and competent peers who got there first, but not on their own.



As part of my long-term recovery, I have become an advocate. Advocacy is our strongest tool to change policy and be a voice for the recovery community at the

local, state, and federal levels. I chair PRO-ACT (http://www.councilsepa.org/programs/pro-act), a well-respected, highly-visible, and vibrant grassroots organization for people affected by addiction and their family members in the greater Philadelphia, PA area.

I am also grateful to have helped my son begin and sustain 13 years in long-term recovery and my brother celebrate 10 years of sustained recovery. Peer assistance, recovery coaching, and recovery mentoring from reliable professional and recovery resources played a significant role in our recovery. We had good role models in recovery that enabled us to imitate what they did to be successful. We each had a minimum of 30 days of residential professional care followed by aftercare and regular attendance at 12-step meetings. We all found the same pathway: timely intervention, a continuum of treatment, and recovery support for some time afterwards.

"Advocacy is our strongest tool to change policy and be a voice for the recovery community at the local, state, and federal levels."



BETH

Blogger, Be Here Today Irving, TX

My life was spinning out of control. You couldn't tell by looking at me. I had a three-bedroom house with the person I loved, a great job, and a nice car; but I was miserable.

I felt like two people: one who didn't know who I was or who I wanted to be, and the other a completely together person that I let everyone see. I spent years, including many after I sobered up, trying to find myself in other people. I placed my self-worth in the hands of others.



I drank excessively. I didn't want to feel anything, except that I was in control of my circumstances. In the most sincere moment of my life, I said to the universe, "I can't do this anymore."

When I arrived on the doorstep of recovery, I was a broken woman. My self-respect was in tatters, and my spirit was as broken as the bottles left in my wake. The most costly price was the jumbo-size crater in my soul.

In sobriety, it was as if a brand new notebook and a box of drawing pencils were laid in front of me. People told me I could draw the life of my dreams. One by one, I picked up the pencils and began to draw and write my life. It wasn't easy at first, and the life I drew then doesn't exactly resemble the life I sketch now.

I am my own, proud woman in recovery for 21 years. I care for myself and do my best to maintain my integrity with myself and others. I nurture my spiritual life and grow daily by practicing positive principles.

I am so very grateful for this precious gift of sobriety.

"In sobriety, it was as if a brand new notebook and a box of drawing pencils were laid in front of me. People told me I could draw the life of my dreams."



CHRIS BUDNICK

Vice President of Programs, The Healing Place of Wake County Raleigh, NC

A friend of mine recently said about recovery, "There is room around the table for everyone." In the beginning, I wondered if I belonged at that table. I was 16 when I was first exposed to recovery and was just shy of my 19th birthday when I ultimately entered my recovery. In addition to addiction, I struggled with depression, thoughts of suicide, a history of cutting and burning myself, a childhood head injury, and an overwhelming sense of not belonging.



When I entered an inpatient treatment program in 1990, I was confused and scared. I did not intend, plan, or expect to still be in recovery years later. However, after I completed inpatient treatment, I found people in recovery who guided me, supported me, and encouraged me.

I am grateful for my family for intervening early and providing support and resources for me to seek help. Staying in recovery has required continued involvement with peer-based recovery supports, and at times, professional assistance.

As a result of being in recovery, I have a college education and a meaningful career. I have rediscovered lost interests and broadened my experiences, and I am blessed with the support and love of others in recovery, as well as friends and family who support and believe in recovery.

Today, I belong around the table.

"I have rediscovered lost interests and broadened my experiences, and I am blessed with the support and love of others in recovery..."



CURTISS KOLODNEY

Recovery Support Services Consultant Washington, DC

I am a person in long-term recovery, which for me means that I haven't used substances for more than eight years. Recovery has changed my life.

I was introduced to drugs in high school and was expelled from schools more than once. I eventually graduated from college, married, and got a job at a large managed care organization as a director in health care operations. Although I kept my addiction pretty much hidden during this time, I struggled to maintain relationships. When they fell apart, I always believed it was the other person's fault.



When I got divorced in 1999, I didn't realize that I was incapable of having any type of relationship. At that point, my addiction began to take off. I stopped going to work, and when I could no longer feed my addiction, I decided I would take my life. When I tried, I ended up calling an ambulance – and have never felt so relieved. I was finally able to say I needed help. I went to treatment and soon thereafter I relapsed. About one year later, through the help of a 12-step program, my recovery began to take hold.

I held several jobs early in my recovery, including a house manager at a treatment facility and at a recovery house, and an outreach worker. I wanted to contribute and share the gifts that I had received. In 2011, I became involved with my partner who was a former college classmate. It took my whole life to get to the relationship that I am in now. I am a real partner in the most wonderful, giving relationship I could ever dream of. I work, vote, pay taxes, and I am involved in my community. Recovery is a gift that I get to open again and again, every day. I am living proof that recovery is possible.

"Recovery is a gift that I get to open again and again, every day."



DAPHNE

Freelance Writer and Homemaker Lakeland, FL

My name is Daphne, and I have bipolar disorder.

I was diagnosed in 2009, after delaying doctor visits for fear of being labeled "weak" or "crazy." I was ashamed and in denial. Only after experiencing post-traumatic stress disorder (PTSD) did I take my counselor's advice to visit a psychiatrist.

My counselor, psychiatrist, and recovery group have been God's gifts to me.



My counselor has helped me to process my feelings – not only with PTSD, but also with mood swings that accompany bipolar disorder. She has taught me specific techniques to process life in general and to continue the process of self-reflection and personal freedom.

My psychiatrist has helped me to understand – and accept – that bipolar disorder is an illness just like any other chronic illness. It took a while to identify the medications that worked for me, but my psychiatrist never gave up on me. He listened to me, and he encouraged me. I now have an excellent medication with few side effects. When I feel an episode coming on, I use the techniques he has taught me to identify it early on and to deal with it in a healthy manner. My psychiatrist truly has given me "better living through chemistry."

My recovery group has supported me every step of the way. They have listened to me. They have never judged me or treated me any differently. They have loved me unconditionally.

I now understand that it's okay to get help – from family, friends, counselors, doctors, recovery groups, and yes, even medications.

I couldn't make it a single day without God's help. He has brought me to where I am today. He loves me just as I am – and now, I do too.

"My recovery group has supported me every step of the way. They have listened to me. They have never judged me or treated me any differently. They have loved me unconditionally."



EMILY

Director, Center for Addiction Recovery, Jiann-Ping Hsu College of Public Health, Georgia Southern University Statesboro, GA

My name is Emily, and I'm in long-term recovery. I started drinking when I was 17 and I got sober shortly after my 22^{nd} birthday. In that short time, alcohol took me into some of the darkest corners of society and into a seemingly endless depression and emptiness of spirit. I was attending a large state school at the time, and there were limited recovery resources available to students on campus or in the community. I was lost and scared, so I walked into the rooms of a 12-step fellowship where I found companionship, hope, and a solution for living that has worked for me as a way of life ever since.



I'm now 27 years old and have been in recovery for more than 5 years. In that time, I've earned my master's degree and started working toward my doctorate. I have an exuberant and delightful 2-year-old daughter, and I mentor many women in the community. I'm working in the field of public health, where I serve students (much like the scared one I once was) who are in recovery from substance use disorders. My life is so incredibly full today! I get to work with and support students who are in recovery and provide them with the resources that I wish I had access to when I was newly sober. I am eternally grateful for my life today and to share my solution with others who need it!

"I was lost and scared, so I walked into the rooms of a 12-step fellowship where I found companionship, hope, and a solution for living..."



JAQUESE ARMSTRONG Edison, NJ

I have been living with a mental illness for 30 years. For 25 of those years, I was stubborn and living in delusion and psychosis. I am a living testimony that you can make it through if you have faith and, in my case, family.

I was 20 years old when I had my first psychotic episode, and not long after I became catatonic – a psychiatric state where I stopped almost all movement. There weren't very many good drugs on the market in the early 80s. I was given shock treatments and an antipsychotic and sent on my way. While adjusting to treatment, I had to change my chemical engineering major, and it took eight years for me to get a B.A. in journalism.



I worked on and off after I completed school. My family moved a lot, so I got the benefit of new psychiatrists. They found the combination of drugs that worked for me through a research project. In about a year, I was psychosis-free, and I have been managing my mental illness for more than six years. I give thanks to God and family who have always helped me along the way.

I am now in my fifth year of a workable level of recovery and wellness. I enjoy living independently. I volunteer with a mental health organization and do everything I can to combat misconceptions, including participating in a documentary, delivering inspirational speeches, and publishing articles. I am also working to publish a memoir. I hope these projects will inspire, educate, and stimulate conversation about mental health issues on a personal level. All of these activities help me to feel that my experience was not in vain. When everyone begins to understand, I am confident that the misconceptions will fade.

"I am now in my fifth year of a workable level of recovery and wellness. I enjoy living independently."



STANICE ANDERSON

Author, Speaker, and Blogger, The Huffington Post and The WOW Zone Washington, DC

I am a woman blessed with the gift of long-term recovery! I am also the woman who kept dying and coming back after a heroin overdose. The dreams that my addiction stole from me were restored, my passion for life was resurrected, and my purpose redefined.

In the beginning, I doubted that I could stay clean for 24 hours. Now, one day at a time, it's been 27 years and counting. For me, the 11 keys that unlocked the door to successful, long-term, and thriving recovery are (1)



surrendering – accepting that I could not stay clean on my own; (2) transparency with the people in my life; (3) joining a 12-step program, including having a sponsor; (4) seeking professional counseling that helped me get to the root causes of my addiction; (5) praying for and exercising the resulting faith; (6) utilizing the arts and creative expression that promotes healing from the inside out; (7) actively searching to discover and hone my gifts; (8) finding role models who encouraged and empowered me; (9) finding hope in listening to the stories and experiences of others; (10) forgiving myself and others, and accepting God's forgiveness. I also sought forgiveness from the people I hurt – especially my son, who I abandoned during my addiction; and (11) perseverance – through time, consistency, love, and patience, the wounds healed and my relationships with God, people, and myself flourished. Slowly, I earned the title "Moms," and my three young grandchildren lovingly call me "Hallelujah Grandma."

By God's amazing grace and the help of the people who've textured my life, I am living my resurrected dreams. As an author of several published books, including "I Say A Prayer For Me: One Woman's Life of Faith and Triumph," "Walking On Water When The Ground Ain't Enuf," and "12-Step Programs: A Resource Guide," I know that my words help change and save lives.

As a poet and performance artist, I write and perform one-woman shows about my journey. In 2012, I was appointed as SAMHSA's National Honorary Chairperson for Wellness Week. Where once I existed in the land of "nevers," now I live my dreams in the fertile land of infinite possibilities.

Hope is contagious! My passionate purpose is to spread it – one day at a time.

"In the beginning, I doubted that I could stay clean for 24 hours. Now, one day at a time, it's been 27 years and counting."



VICTORIA COSTELLO

Author and Mental Health Advocate, Mental Health Mom Blog San Francisco, CA

At age 17, my son Alex lost his ability to finish a whole sentence, get a night's sleep, or face the other kids at school. The doctors who examined him at UCLA Neuropsychiatric Institute told me he should stay for a month so they could make a proper diagnosis and stabilize what they called his "psychotic symptoms."

Having raised two athletic sons, I'd been in an emergency room with each of them more than once, but I can't imagine any two words coming from the mouth of a doctor putting more terror into the heart of a mother than "psychotic symptoms." But what I was about to learn would open my eyes to much more.



Alex's self portrait.

From a simple family mental health history interview, I learned a lot. For the first time, I considered that a grandfather I'd never met, whose early death on a railroad track had always been called an accident, could have taken his own life. Or that the heavy drinking of several family members was probably an attempt to self-medicate severe depression, perhaps even bipolar disorder in the cases of my grandfather and sister. Within six months of that interview, I also began treatment for my own life-long depression.

After nearly losing my son to an illness, I've come to believe that those of us who survive such a family history have a special responsibility to break this wall of silence. After three years spent in psychotherapy and taking a brief course of antipsychotic medication, Alex was able to return to school and complete his education at a prestigious art college. Today he's working and living a full life – as is his mother.

"...what I was about to learn would open my eyes to much more."

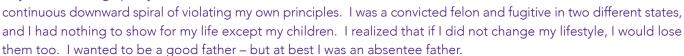


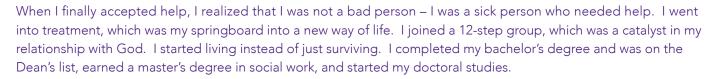
DR. ALMUSTAPHAEL **AL-KAHLIL-BEY**

L.P.C., M.S.W., M.A.C., I.C.A.D.C.

Director, Gospel Rescue Ministries Recovery Services Program Washington, DC

I was born in Baltimore, MD, a descendent of a Caribbean sharecropper and a Native American. Today, I'm a person in long-term recovery for 25 years. Growing up, my addiction led to a life on the streets and a





Today, I am a productive member of society, working at Gospel Rescue Ministries Recovery Services Program and serving as the Mid-Atlantic representative of the Association of Christian Alcohol Drug Addiction Counselors. I am also the credentialing and education chair for the Maryland International Certification & Reciprocity Consortium (IC&RC) Board and an Association for Addiction Professionals (NAADAC)-approved educational provider.

I realized that I was not a bad person

- I was a sick person who needed help."

My life is a practice of gratitude. I am involved in a system that produces qualified committed counselors who

demonstrate personal and professional integrity. I thank God for my recovery.

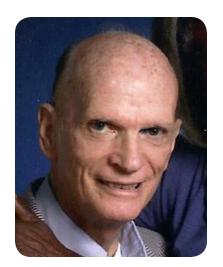




DAN O'LAUGHLIN

Recovery Africa Washington, DC and Accra, Ghana

I am a person in recovery from alcoholism who has not had a drink in just more than 10 years. I drank for many years in high school, college, the Army, and the U.S. Peace Corps, and then for more than 30 years in many countries around Africa. In my mind, I was not an alcoholic, but someone whose work required a lot of drinking time. I did not consider myself an alcoholic because I worked hard, ran a marathon in Botswana at age 50, was charitable, and went to church regularly.



However, as I got older, life became a burden due to the headaches, hangovers, and anger. I seldom went a day without drinking. When I could no longer control my drinking, I finally stopped and found a new way of living. My response was to go into a 12-step meeting to figure out how to get back to the good old days. My wife and daughter have been important partners on my recovery journey.

These past 10 years have been filled with an exciting life of helping to carry the message of recovery to Ghana, and networking with organizations across the United States, such as Faces & Voices of Recovery, Oxford House, Inc., universities, rehab facilities, and others. Working with a growing group of supporters, we've been able to open two Oxford Houses in Ghana, organized 10 different 12-step meetings, and opened the House of St. Francis as a rehab facility on August 1, 2012. Recovery has given me these fun, unique, and exciting opportunities.

"When I could no longer control my drinking, I finally stopped and found a new way of living."



KARENWashington, DC

My freedom from the bondage of more than 20 years of drug use began with my arrest in April 2004. I was tired of using drugs, but I didn't know how to stop. Addiction not only cost me my freedom, but also the custody of my daughter. This arrest pointed me in the direction of the DC Superior Court's Family Treatment Court program, which gave me the opportunity to save my life and regain the custody of my little girl. I entered the program in April 2005, when I admitted that I was powerless over my addiction, and my life had become unmanageable.



While in treatment, I realized I didn't have to put myself or my daughter through the pain and humiliation of my disease ever again if I just didn't use drugs. During my 21 months in the Family Treatment Court program, I learned how to really live on life's terms and made the commitment to never use narcotics again. I'm not going to say it's not a daily struggle, but like any other health condition – diabetes, heart disease, obesity – life changes are required in order to thrive.

Stopping drug use is the beginning, but staying off is daily work. Recovery has become my most prized possession. I've gained control over this area of my life through 12-step meetings and a sponsor. I fight the disease of addiction one day at a time.

Today, I love my life, and I am grateful for the challenges that have come my way. Successfully overcoming these obstacles has made me so much stronger and has given me confirmation that I can, and will, be able to deal with anything that comes my way without the use of drugs. My daughter and I have a bond that I can only describe as a grace from God. I wish more people facing a substance use disorder could experience the joy and gratitude that I feel when I wake up in the morning in my right mind, in recovery.

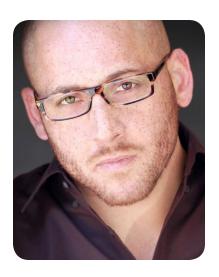
"I learned how to really live on life's terms and made the commitment to never use narcotics again."



KEVIN HINES

Speaker and Author Walnut Creek, CA

As a young man with bipolar disorder, I heard voices in my head, suffered severe mood swings, and sunk into a deep depression. As a way out of the pain, I attempted suicide by jumping off the Golden Gate Bridge. Immediately after jumping and letting go of the rail, I instantly regretted the decision, and tried to position myself in a way that the impact of the water would not immediately kill me. Though I suffered extensive injuries, I survived the jump and now use my experience to help people carry on through their depression and remain positive as they manage their disease.



I have spoken to more than 300,000 people internationally on "living mentally well," my firsthand experience with suicidal thoughts, and the struggles of living with a mental illness. I have been featured in the critically acclaimed film "The Bridge," and on "Larry King Live," "20/20," "Anderson Cooper 360," "Good Morning America," and Ireland's famed "Tonight." I have written several articles about mental health and the prevention of suicide in America and recently finished my memoir, "Coming Apart – Not Broken, The Kevin Hines Story."

My will to live and stay mentally well is supported by my regular participation in cognitive behavioral therapy, a routine sleep cycle, regular physical exercise, and a healthy diet. I refrain from using drugs and alcohol. I also take my medication with 100-percent accuracy.

I hope that my will to live and stay mentally well inspires people to change their lives for the better.

"My will to live and stay mentally well is supported by my regular participation in cognitive behavioral therapy, a routine sleep cycle, regular physical exercise, and a healthy diet."



LISA E. OVERTON

Board Member, A New PATH (Parents for Addiction Treatment & Healing) Spring Valley, CA

The most challenging part about being a veteran in recovery from post-traumatic stress disorder (PTSD) and a substance use disorder is that I don't look like your typical "Disabled Veteran." I have all my limbs and no battle scars. My wounds are internal. But people notice my behavior: I shy away from them. I get anxious in crowds. Loud noises make me jump. I don't attend parties or go out to clubs.

Once they get to know me though, people see the strengths I've used in my recovery, including courage, compassion, honesty, sincerity, loyalty, faith in a higher power, a sense of humor, and the ability to ask for help when I need it and to give help as well. These strengths have supported my recovery in many ways, including learning how to advocate for myself and others.

I am fortunate in that I was able to receive both inpatient and outpatient addiction treatment. Those treatment centers directed me to 12-step recovery, which helped me learn where my thinking needed re-adjusting. I follow the 12 steps, attend meetings on a regular basis, and my higher power steered me to my current sponsor who demonstrates unconditional love.

If I am hurting, I have learned it is okay to find a friend I trust and let them know what I am going through. It is okay to be me. Loyalty to my friends and my recovery keeps me grounded. Being honest and sincere lets people know who I am and that they can trust me too. A sense of humor allows me to laugh at my shortcomings and not take myself so seriously. My faith in my higher power has given me the ability to let go of trying to control everything. This gives me a sense of belonging and a serenity that was unknown to me before. For this I am grateful.

"If I am hurting, I have learned it is okay to find a friend I trust and let them know what I am going through."



JACK McQUEEN

Addiction Professionals Greenlawn, NY

My experience with alcohol started at 17 when I shared a quart of vodka with my best friend. We consumed it in less than a half hour, an episode when perhaps the seeds of alcoholic drinking were sown. When I entered military college, I quickly fell in with an experimental group of cadets. There were warning signs that there was danger ahead, but my blinders were still on. When I got married, drinking was for the most part social. It was not until I hit a single life again after my divorce that my drinking and drug use went into high gear.

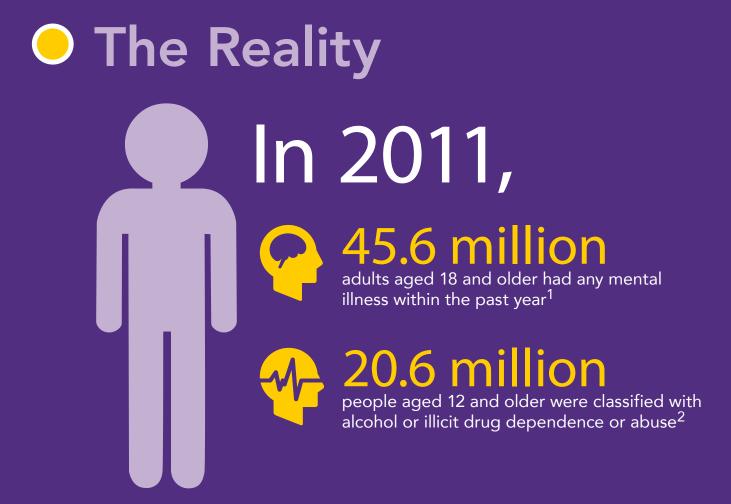


For about 5 years I became a running fanatic, and I can recall some friends asking me what I was running away from. I often scoffed at them, telling myself they just had no clue. However, it was me who had no clue. I went from a chubby 214 pounds to a borderline anorexic at 138 pounds. At age 30, a new group of friends introduced me to cocaine and the downward spiral was in full speed.

After some time, I stopped using cocaine, but my drinking began to escalate. I essentially replaced one drug for another. Drugs and alcohol ruined me financially, physically, and spiritually. My reputation went from a man admired for his brain and running prowess to someone that people joked about behind my back. I never gave my employers my best even though I did not get fired in any of the many positions I held. My alcoholism never brought me to rehab or a DWI, although this may not have been the case had I continued down this path. My tenure in Alcoholics Anonymous (AA) (http://www.aa.org) began on August 28, 1989, a date that will live in my own infamy. Fortunately for me, I have not had a relapse. I know that I have been blessed to remain sober to this day more than 23 years later.

To coin an old phrase – my life has changed in oh so many ways. I never wake up with a hangover or remember what I might have said the night before that might have been misguided. At the end of most days, I can lay my head down and fall asleep knowing that I have given the world my best effort. In sobriety, I was able to earn a second college degree in psychology, and I am currently enrolled as a Credentialed Alcoholism and Substance Abuse Counselor (CASAC) in training and hope to finish that certificate by the middle of 2013. My intention is to become an alcohol and substance abuse counselor because I know that my experience can be a wonderful way for me to give back to the sober life I now live.

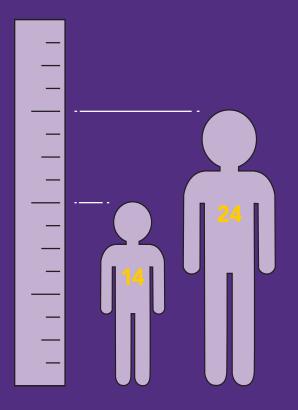
"At the end of most days, I can lay my head down and fall asleep knowing that I have given the world my best effort."



¹Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 1.

²Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p.6.

Prevention



HALF

of all lifetime cases of mental and substance use disorders

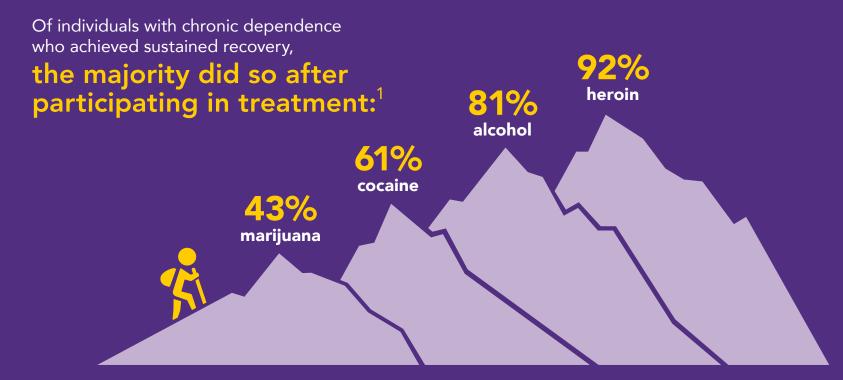
begin by age 14

3/4 by age 24¹

The first symptoms typically precede a mental and/or substance use disorder by two to four years,² offering a window of opportunity to intervene early and often

^{1,2} The National Academies. (2009). Preventing Mental, Emotional, and Behavioral Disorders among Young People Progress and Possibilities. Retrieved September 7, 2012, from http://www.bocyf.org/prevention_policymakers_brief.pdf, p. 1.

Treatment



Between 70% and 90%

of individuals with mental illness experience a significant reduction in symptoms and improved quality of life with treatments and supports²

¹Sheedy C. K., and Whitter M., *Guiding Principles and Elements of Recovery-Oriented Systems of Care: What Do We Know From the Research?* HHS Publication No. (SMA) 09-4439. Rockville, MD: Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, 2009, p. 15.

² National Action Alliance on Mental Illness. (n.d.). What is Mental Illness: Mental Illness Facts. Retrieved September 25, 2012, from http://www.nami.org/template.cfm?section =about_mental_illness.

• Recovery

Approximately 3/4 of Americans believe that recovery is possible

from substances such as alcohol, prescription drugs, and marijuana¹



2/3 of Americans believe that treatment and support can help people with mental illnesses lead normal lives²

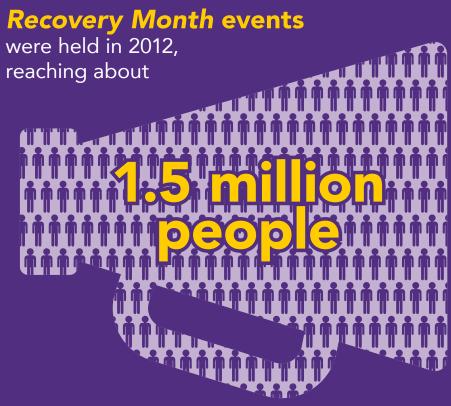


¹ Substance Abuse and Mental Health Services Administration. (n.d.). Americans Believe in Prevention and Recovery From Addiction. CARAVAN Fact Sheet. Retrieved August 30, 2012, from http://www.samhsa.gov/Attitudes/CARAVAN_Factsheet.pdf, p. 3.

²U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2006). *National Mental Health Anti-Stigma Campaign:* What a Difference a Friend Makes (SMA07-4257). Retrieved September 21, 2012, from http://www.samhsa.gov/MentalHealth/SMA07-4257.pdf, p. 3.

Get Involved





Prevention Works · Treatment is Effective · People Recover join the voices september 2013 for recovery

> on pathways to wellness

The Reality

In 2011,



5.6 milli adults aged 18 and older had any mental illness within the past year¹



alcohol or illicit drug dependence or abuse²

Prevention



of all lifetime cases of mental and substance use disorders

HALF

begin by age 14

3/4 by age 24³ The first symptoms typically

precede a mental and/or substance use disorder by two to four years, 4 offering a window of opportunity to intervene early and often

Of individuals with chronic dependence who achieved sustained recovery,

Treatment

the majority did so after participating in treatment:5 61% cocaine

marijuana

92%

heroin

81%

alcohol

of individuals with mental illness experience a significant reduction in symptoms and improved quality of life with treatments and supports⁶

Between 70% and 90%

Approximately 3/4 of Americans believe that recovery is possible from substances such as alcohol, prescription drugs, and marijuana⁷

Recovery





reaching about



National Helpline

Recovery Month events

were held in 2012,

Find Help SAMHSA's

1-800-662-HELP (4357) 1-800-487-4889 (TDD)

treatment referral and information about mental and/or substance abuse disorders, prevention, treatment, and recovery in English and Spanish

Provides 24-hour free and confidential

For more information on Recovery Month and services available

to people in need, please refer to http://www.recoverymonth.gov

¹ Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Mental Health Findings, NSDUH Series H-45, HHS Publication No. (SMA) 12-4725. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p. 1.

H-44, HHS Publication No. (SMA) 12-4713. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2012, p.6. ³ The National Academies. (2009). Preventing Mental, Emotional, and Behavioral Disorders among Young People Progress and Possibilities. Retrieved September 7, 2012, from http://www.bocyf.org/prevention_policymakers_brief.pdf, p. 1. ⁴ The National Academies. (2009). Preventing Mental, Emotional, and Behavioral Disorders among Young People Progress and Possibilities. Retrieved September 7, 2012,

from http://www.bocyf.org/prevention_policymakers_brief.pdf, p. 1. ⁵Sheedy C. K., and Whitter M., Guiding Principles and Elements of Recovery-Oriented Systems of Care: What Do We Know From the Research? HHS Publication No. (SMA) 09-4439. Rockville, MD: Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration, 2009, p. 15. 6 National Action Alliance on Mental Illness. (n.d.). What is Mental Illness: Mental Illness Facts. Retrieved September 25, 2012, from http://www.nami.org/template.cfm?

² Substance Abuse and Mental Health Services Administration, Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series

section=about_mental_illness. ⁷ Substance Abuse and Mental Health Services Administration. (n.d.). Americans Believe in Prevention and Recovery From Addiction. CARAVAN Fact Sheet. Retrieved August 30, 2012, from http://www.samhsa.gov/Attitudes/CARAVAN_Factsheet.pdf, p. 3.

⁸ U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2006). National Mental Health Anti-Stigma Campaign: What a Difference a Friend Makes (SMA07-4257). Retrieved September 21, 2012, from http://www.samhsa.gov/MentalHealth/SMA07-4257.pdf, p. 3.







Recovery Month

Prevention Works · Treatment is Effective · People Recover

september **2013**





september 2013





prevención funciona · El tratamiento es efectivo · Las personas se recuperan

septiembre 2013



Mes Nacional de la Recuperación
La prevención funciona · El tratamiento es efectivo · Las personas se recuperan

septiembre **2013**